

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

National Association of Insurance and Financial Advisors Political Action Comm

ADDRESS (number and street)

2901 Telestar Ct.

Check if different
than previously
reported. (ACC)

Falls Church

VA

22042

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005249

3. IS THIS
REPORTNEW
(N)**OR**AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

1 2

0 1

2 0 0 7

through

1 2

3 1

2 0 0 7

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Peter C. Brown

Signature of Treasurer

Electronically Filed by Peter C. Brown

Date

0 1

3 1

2 0 0 8

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	2	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		138478.22
(b) Cash on Hand at Beginning of Reporting Period	326485.82	
(c) Total Receipts (from Line 19)	172461.49	1175320.98
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	498947.31	1313799.20
7. Total Disbursements (from Line 31)	109008.82	923860.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	389938.49	389938.49
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	104138.27	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	2	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	57579.49	367659.70
(i) Itemized (use Schedule A)		
(ii) Unitemized	114882.00	805161.28
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	172461.49	1172820.98
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➤	172461.49	1175320.98
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	172461.49	1175320.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	172461.49	1175320.98

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1458.82	160428.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	1458.82	160428.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	107500.00	760000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	50.00	3432.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	50.00	3432.50
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	109008.82	923860.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	109008.82	923860.71

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	172461.49	1175320.98
34. Total Contribution Refunds (from Line 28(d))	50.00	3432.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	172411.49	1171888.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1458.82	160428.21
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1458.82	160428.21

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James C. Clabuesch

Mailing Address 11375 Fairway Dr

City

Roscommon

State

MI

Zip Code

48653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Clabuesch Financial Servi-
ces

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865368

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Ms. Cheryln L. Houpo

Mailing Address 659 Akakuu St

City

Wailuku

State

HI

Zip Code

96793

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regal Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865475

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Adam Cole McConathy

Mailing Address 607 Kendal Ridge

City

Monroe

State

LA

Zip Code

71201

FEC ID number of contributing
federal political committee.

C

Name of Employer
MetLife Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865518

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

97.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. George W. Williams, Jr., LUTCF

Mailing Address 4109 Woodway Dr

City

Monroe

State

LA

Zip Code

71201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Benefit Plan Service

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865551

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Rebecca J. Flickinger

Mailing Address 1900 W Hart Ave

City

Orange

State

TX

Zip Code

77630

FEC ID number of contributing
federal political committee.

C

Name of Employer
Flickinger Insurance Agen-
cy

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865565

Amount of Each Receipt this Period

17.00

C.

Full Name (Last, First, Middle Initial)

Ms. Elizabeth J. Lee

Mailing Address 19431 Rue de Valore
22G

City

Foothill Ranch

State

CA

Zip Code

92610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Financial Diligence Part-
ners

Occupation
Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865579

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

63.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. J Michael Clinton

Mailing Address 3525 Tilford Cir

City

Monroe

State

LA

Zip Code

71201

FEC ID number of contributing
federal political committee.

C

Name of Employer
MetLife Financial Services

Occupation

Field Service Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865580

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Candace H. Berkman

Mailing Address 13095 Seagrove Street

City

San Diego

State

CA

Zip Code

92130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865597

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Mr. Melvin Chilewich, CSA,J.D.

Mailing Address 316 Chanticleer Dr

City

Cherry Hill

State

NJ

Zip Code

08003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wienkon & Associates

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865612

Amount of Each Receipt this Period

18.00

SUBTOTAL of Receipts This Page (optional)

90.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Rex W. Oliver

Mailing Address 1173 South 250 West
Suite 201

City State Zip Code
Saint George UT 84770

FEC ID number of contributing
federal political committee.

C

Name of Employer
Oliver Insurance and Fina-
ncial

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865672

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Mr. Paul Adams

Mailing Address 5101 Missy Maric Lane

City State Zip Code
Las Vegas NV 89130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Clearline Financial Group

Occupation
Field Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1176.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865689

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Mr. Akihiro F. Liu

Mailing Address 14314 Burbank Blvd, #214

City State Zip Code
Van Nuys CA 91401

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Pacific Bridge Compan-
ies

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865693

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

213.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Christopher Luke Simons

Mailing Address 713 Carper Dr

City

Artesia

State

NM

Zip Code

88210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Simons & Associates

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865695

Amount of Each Receipt this Period

50.40

B.

Full Name (Last, First, Middle Initial)

Mrs. Kelli Park Fuhrmann

Mailing Address 647 S. Main Ave #209

City

Sioux Falls

State

SD

Zip Code

57104

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA - South Dakota

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865721

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Sharon G. Heierman, CAE

Mailing Address 2990 Kemp Rd

City

Havana

State

FL

Zip Code

32333

FEC ID number of contributing
federal political committee.

C

Name of Employer
Florida Association of In-
surance & Fin

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865729

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

117.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Robin Lynn Kagan

Mailing Address 1025 12th

City

Bellingham

State

WA

Zip Code

98225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bankers Life & Casualty
Co.

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865737

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Mr. Brad A. Tapscott, CFP

Mailing Address 523 Castle Hall Rd

City

Mount Pleasant

State

SC

Zip Code

29464

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ameriprise Financial

Occupation
Certified Financial Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865769

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Greg W. Jacobs

Mailing Address 1350 Grand Summitt Drive #116

City

Reno

State

NV

Zip Code

89523

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hendricks Insurance Agency

Occupation
Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865773

Amount of Each Receipt this Period

25.20

SUBTOTAL of Receipts This Page (optional)

66.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Monica J. Lawfield, CMFC

Mailing Address 6851 Caballero Dr.

City

Jacksonville

State

FL

Zip Code

32217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waddell & Reed, Inc.

Occupation

Division Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865776

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Matthew Edelstein, CLU,ChFC

Mailing Address 1550 Penstemon Ct

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ohio National Financial
Services

Occupation

Insurance Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865785

Amount of Each Receipt this Period

8.50

C.

Full Name (Last, First, Middle Initial)

Mr. Larry G. Johnson, LUTCF,CSA

Mailing Address 44466 Albert

City

Plymouth

State

MI

Zip Code

48170

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farm Bureau Ins Co

Occupation

AGENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865792

Amount of Each Receipt this Period

27.50

SUBTOTAL of Receipts This Page (optional)

57.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Matthew B. Stone, LUTCF

Mailing Address 212 Stoney Dr.

City

Durham

State

NC

Zip Code

27703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southern Farm Bureau Life
Ins

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865799

Amount of Each Receipt this Period

24.75

B.

Full Name (Last, First, Middle Initial)

Constance Y. Golleher

Mailing Address PO Box 255

City

Mc Lean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Holleman Companies

Occupation

Director of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865817

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Mr. Adi Ringer, LUTCF, CFP

Mailing Address 888 Vista Brisa

City

San Luis Obispo

State

CA

Zip Code

93405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burrola Ringer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865837

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

77.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Matthew C. Weider, CLU, ChFC

Mailing Address 6855 Compton Heights Circle

City

Clifton

State

VA

Zip Code

20124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865911

Amount of Each Receipt this Period

50.40

B.

Full Name (Last, First, Middle Initial)

Mr. Brian Urie, CFP

Mailing Address 2825 E. Cottonwood Pkwy
STE 470

City

Salt Lake City

State

UT

Zip Code

84121

FEC ID number of contributing
federal political committee.

C

Name of Employer
AXA Advisors, LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865916

Amount of Each Receipt this Period

2.50

C.

Full Name (Last, First, Middle Initial)

Mr. Brian D. Boesiger, CSA, LUTC

Mailing Address 7021 S. 33rd Street

City

Lincoln

State

NE

Zip Code

68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Benefit Management

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865937

Amount of Each Receipt this Period

32.50

SUBTOTAL of Receipts This Page (optional)

85.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Charles I. Daniels, III

Mailing Address 2424 Merlot Drive

City

Napa

State

CA

Zip Code

94558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harvest Financial, LLC

Occupation

Family Financial Coach

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865953

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Anthony D. Chapman

Mailing Address 210 East 2nd Ave, Suite 300

City

Rome

State

GA

Zip Code

30161

FEC ID number of contributing
federal political committee.

C

Name of Employer
AIMC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865958

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Ms. Dianne C. Mitchell

Mailing Address 2209 Ontario Street

City

Bellingham

State

WA

Zip Code

98226

FEC ID number of contributing
federal political committee.

C

Name of Employer
AmerUs Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865960

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

71.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Miguel Paredes, CSA

Mailing Address 5927 Tamarisk

City

San Luis Obispo

State

CA

Zip Code

93401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Neal Truesdale Ins.

Occupation
Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5865986

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Charles A. Webb

Mailing Address 2516 Longview Ave.

City

Roanoke

State

VA

Zip Code

24014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Benefits Group, Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866019

Amount of Each Receipt this Period

42.50

C.

Full Name (Last, First, Middle Initial)

Ms. Nancy P. Cubberley

Mailing Address P O Box 5109

City

Sevierville

State

TN

Zip Code

37864

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cubberley Agency, Inc.

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866026

Amount of Each Receipt this Period

27.50

SUBTOTAL of Receipts This Page (optional)

112.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Terry R. Thayer

Mailing Address 353 Prospector Trail

City

Bozeman

State

MT

Zip Code

59718

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thayer Agency

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866080

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Mr. Harry S. Rosnick, LUTCF

Mailing Address 3435 Jefferson Davis Hwy
P.O. Box 360

City

Fredericksburg

State

VA

Zip Code

22404

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nationwide Insurance

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866085

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Ms. Deborah A. Stratton-Flandro

Mailing Address 2595 Spanbauer Rd

City

American Falls

State

ID

Zip Code

83211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farm Bureau -Power County
Office

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866095

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

65.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Cliff F. Wilson, CLU, ChFC,

Mailing Address 1458 W. Bahia Court

City

Gilbert

State

AZ

Zip Code

85233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southeast Arizona Ins. Se-
rvices, LTD /

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1512.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866096

Amount of Each Receipt this Period

126.00

B.

Full Name (Last, First, Middle Initial)

Mr. Lucius Williamson, Jr., LUTCF

Mailing Address 1111 Howe Ave., Suite 530

City

Sacramento

State

CA

Zip Code

95825

FEC ID number of contributing
federal political committee.

C

Name of Employer
LPL Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866102

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Miss Denise L. Gott, CLTC, MBA

Mailing Address 20679 Beach Cliff Blvd

City

Rocky River

State

OH

Zip Code

44116

FEC ID number of contributing
federal political committee.

C

Name of Employer
LTC Financial Partners,
LLC

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866121

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

157.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr Paul S Brawner, AIP

Mailing Address 4569 Chastain Drive

City

Melbourne

State

FL

Zip Code

32940

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bill & Sheila Gaylor Insu-
rance Pros

Occupation

Agency Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866161

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr Joseph L Morton, III, JD

Mailing Address 5487 N. Bach

City

Meridian

State

ID

Zip Code

83642

FEC ID number of contributing
federal political committee.

C

Name of Employer
Intermountain Legal Group

Occupation

Attorney At Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1554.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866162

Amount of Each Receipt this Period

126.00

C.

Full Name (Last, First, Middle Initial)

Mr. Todd A. Otto

Mailing Address 945 Senior Ave

City

Dickinson

State

ND

Zip Code

58601

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.20

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866177

Amount of Each Receipt this Period

25.20

SUBTOTAL of Receipts This Page (optional)

176.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James P. Shaheen, LUTCF

Mailing Address 3939 Linden Ave

City

Long Beach

State

FL

Zip Code

90807

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866182

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. C. Wayne Perkins, LUTCF

Mailing Address P. O. Box 397

City

Oxford

State

MS

Zip Code

38655

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farm Bureau

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866189

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Mr. Michael W. Struebing, LUTCF, CLU

Mailing Address 16112 Parker Street

City

Omaha

State

NE

Zip Code

68118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heritage Financial Servic-
es, LLC

Occupation
Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866204

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional)

86.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Preston R. Speece, LUTCF

Mailing Address 14620 Fowler Ave

City

Omaha

State

NE

Zip Code

68116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heritage Financial Services

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866210

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Ms. Cheryl R. Parker, CLU, ChFC,

Mailing Address 4120 Rainbow Drive

City

Virginia Beach

State

VA

Zip Code

23456

FEC ID number of contributing
federal political committee.

C

Name of Employer
Atlantic Charter Insurance Group

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866221

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Alan F. Simonis, Jr., LUTCF

Mailing Address P. O. Box 1858

City

Huntsville

State

AL

Zip Code

35807

FEC ID number of contributing
federal political committee.

C

Name of Employer
Protective Life - Alabama

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866235

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

76.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Lester E. Westgard, CLU

Mailing Address 2714 26th Ave SW

City

Fargo

State

ND

Zip Code

58103

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Principal Financial
Group

Occupation

Special Marketing Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866238

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

Mr. D. David Russell

Mailing Address 8461 Eagle Preserve Way

City

Sarasota

State

FL

Zip Code

34241

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rogers Benefit Group

Occupation

Regional Mgr.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866239

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. James A. Shalek, CLU,ChFC

Mailing Address 1706 Candleberry Lane

City

Yorkville

State

IL

Zip Code

60560

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Financial Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866245

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional)

152.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Brian E. O'Brien, CLU,ChFC,L

Mailing Address 1651 Wolf Run Dr.

City

Richfield

State

WI

Zip Code

53076

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Principal Financial
Group

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866249

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert E. Ross, LUTCF

Mailing Address 3918 S. Lisbon Way

City

Aurora

State

CO

Zip Code

80013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ross South Metro Agency,
Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866254

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jerry Lynn Stephens, LUTCF

Mailing Address 130 Tarheel Rd

City

Lumberton

State

NC

Zip Code

28358

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Professional Servi-
ces

Occupation

Managing General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.20

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866281

Amount of Each Receipt this Period

23.10

SUBTOTAL of Receipts This Page (optional)

125.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Stephen D. Noblin, CLU,ChFC,L

Mailing Address 128 dogwood Lane

City

Cowpens

State

SC

Zip Code

29330

FEC ID number of contributing
federal political committee.

C

Name of Employer
ING Reliastar

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866283

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Peter D. Sullivan

Mailing Address 824 Holter St

City

Helena

State

MT

Zip Code

59601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sullivan Financial Group

Occupation

Registered Representative

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866284

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Mr. Robert W. Tull, CLU, ChFC

Mailing Address 7815 Eagle Rock, N.E.

City

Albuquerque

State

NM

Zip Code

87122

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual Fin
Network

Occupation

Senior Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866296

Amount of Each Receipt this Period

25.50

SUBTOTAL of Receipts This Page (optional)

71.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert Sukolsky

Mailing Address 325 5th Ave # 101

City

Indialantic

State

FL

Zip Code

32903

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual Finan-
cial Network

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866311

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. August P. Richter, IV, LUTCF,

Mailing Address 401 Wild Oak Drive

City

Manitowoc

State

WI

Zip Code

54220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Special Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866318

Amount of Each Receipt this Period

50.40

C.

Full Name (Last, First, Middle Initial)

Ms. Martha N. Olmstead, CLU, ChFC,

Mailing Address 56 Divisadero St

City

San Francisco

State

CA

Zip Code

94117

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866330

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

96.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James D.C. Pirkle

Mailing Address 395 Del Monte Ctr Suite 202

City State Zip Code
 Monterey CA 93940

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866360

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. John P. Mosley, CLU, ChFC,

Mailing Address 24 Pitt Street

City State Zip Code
 Portland ME 04103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eagle Strategies Corp.

Occupation
Financial Adviser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.44

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866362

Amount of Each Receipt this Period

23.04

C.

Full Name (Last, First, Middle Initial)

Mr. John P. Steele, LUTCF

Mailing Address 122 West Main

City State Zip Code
 Manhattan MT 59741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montana Employee Benefit
Co.

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866363

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

78.04

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Mark Phelan Sudderberg

Mailing Address 1751 Clinton St.

City

Rockford

State

IL

Zip Code

61103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coyle Varland Insurance
Agency, Inc.

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866382

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. William L. Rudd, LUTCF

Mailing Address 3150 Mollifield Lane

City

Charlottesville

State

VA

Zip Code

22911

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nationwide Insurance

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866402

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Gregory B. Schaeffer

Mailing Address 3627 - 22nd St.

City

Kenosha

State

WI

Zip Code

53144

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Schaeffer Group, LLC

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866403

Amount of Each Receipt this Period

27.00

SUBTOTAL of Receipts This Page (optional)

69.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John N. Peacock, Jr., CFP

Mailing Address 32 Arthur St

City

Seekonk

State

MA

Zip Code

02771

FEC ID number of contributing
federal political committee.

C

Name of Employer
Peacock Financial Group,
LLC

Occupation

Certified Financial Planner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866410

Amount of Each Receipt this Period

18.00

B.

Full Name (Last, First, Middle Initial)

Mr. Marlin D. Wells, CLU, ChFC,

Mailing Address 2201 N. Washington

City

Roswell

State

NM

Zip Code

88201

FEC ID number of contributing
federal political committee.

C

Name of Employer
AXA Advisors, LLC

Occupation

Financial Professional

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866429

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Cyndy M. Pierson

Mailing Address 13800 Vista Dorada

City

Salinas

State

CA

Zip Code

93908

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pierson & Associates Insu-
rance Service

Occupation

Vice President/Owner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866434

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

69.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph A. Sztapka

Mailing Address 3705 S. Judy Ave

City

Sioux Falls

State

SD

Zip Code

57103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Modern Woodmen of America

Occupation

Agency Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866441

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Mr. Scott H. Richards

Mailing Address 603 Lake St. #304

City

Excelsior

State

MN

Zip Code

55331

FEC ID number of contributing
federal political committee.

C

Name of Employer
North Star Resource Group

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866443

Amount of Each Receipt this Period

4.25

C.

Full Name (Last, First, Middle Initial)

Mr. John D. Traynham, LUTCF

Mailing Address 210 Timber Lane

City

Anderson

State

SC

Zip Code

29621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Minnesota Life

Occupation

Registered Representative

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866444

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

101.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Benson B. Terrell, Jr., CFP

Mailing Address 9261 Lanier Rd

City

Lake Charles

State

LA

Zip Code

70605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Barry Terrell, CFP

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866445

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. John F. Nichols, CLU, DIA

Mailing Address 1331 W Norwood Avenue

City

Chicago

State

IL

Zip Code

60660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Disability Resource Group,
Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

754.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866474

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Joey Ussery, CLU, CHFC

Mailing Address 3539 River Road

City

Sealy

State

TX

Zip Code

77474

FEC ID number of contributing
federal political committee.

C

Name of Employer
John Hancock Life Insura-
nce Co.

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866506

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

114.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Pierce Allen Stevens, Jr.

Mailing Address P O Box 119

City

Anguilla

State

MS

Zip Code

38721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capital Care

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866532

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ms. Shelley M. Rowe, LUTCF

Mailing Address 5908 E. Conservation Dr.

City

Longmont

State

CO

Zip Code

80504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Generations Financial Res-
ources

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866550

Amount of Each Receipt this Period

37.50

C.

Full Name (Last, First, Middle Initial)

Mr. Boyd Lee Williams

Mailing Address 7023 W. Williamette Ave

City

Kennewick

State

WA

Zip Code

99336

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kansas City Life Insurance
Company

Occupation
Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1672.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866552

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)

270.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Sharon S. Walls, CLU,ChFC,L

Mailing Address 1831 Frontier Rd

City

Bennington

State

KS

Zip Code

67422

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kansas Financial Services

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866553

Amount of Each Receipt this Period

18.00

B.

Full Name (Last, First, Middle Initial)

Mr. Kenneth A. Sherlin, III,LUTC

Mailing Address 8 First Street

City

Ashville

State

NC

Zip Code

28803

FEC ID number of contributing
federal political committee.

C

Name of Employer
Keystone/Benefit Design

Occupation

Marketing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866574

Amount of Each Receipt this Period

13.75

C.

Full Name (Last, First, Middle Initial)

Mr. Michael P. Saunders, CLU

Mailing Address 4560 Ortega Blvd

City

Jacksonville

State

FL

Zip Code

32210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Saunders & Co.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866584

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

52.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. William Poe, Jr., CLU

Mailing Address 2397 Samuelson Rd

City

State

Zip Code

Portage

IN

46368

FEC ID number of contributing
federal political committee.

C

Name of Employer
Poe & Associates, Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866585

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Steven M. Stratton, LUTCF, CSA

Mailing Address 17131 Parkview Dr

City

State

Zip Code

Morgan Hill

CA

95037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capital Planning Partners,
LLC

Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866591

Amount of Each Receipt this Period

105.00

C.

Full Name (Last, First, Middle Initial)

Ms. Carolyn R. Watson, LUTCF

Mailing Address 2032 Hollis

City

State

Zip Code

Abilene

TX

79605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ohio National Financial
Services

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866603

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Morales, LUTCF, CLT

Mailing Address 1125 Wyoming Avenue

City

Reno

State

NV

Zip Code

89503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brecek & Young Advisors,
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866612

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

Mr. Roger L. Owens, LUTCF, RHU

Mailing Address 104 Landing Lane

City

Elkton

State

MD

Zip Code

21921

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rymark Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866613

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Richard R. Rios, CLU, ChFC

Mailing Address 8720 El Chapul Way

City

Fair Oaks

State

CA

Zip Code

95628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brecek & Young Advisors

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866619

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

152.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Brad Tison, CLU, ChFC,

Mailing Address 3216 Southern Woods Drive

City

Des Moines

State

IA

Zip Code

50321

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Achievement Group/Maxx
Financial

Occupation

Regional Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866622

Amount of Each Receipt this Period

50.40

B.

Full Name (Last, First, Middle Initial)

Mr. B. Keith Potts

Mailing Address P.O. Box 821

City

Wolfforth

State

TX

Zip Code

79382

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866645

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Mr. Randall S. Prout

Mailing Address 651 W 9th St

City

Claremont

State

CA

Zip Code

91711

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866652

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

106.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Edward F. Randolph

Mailing Address 1515 Mill Bay Road

City

Kodiak

State

AK

Zip Code

99615

FEC ID number of contributing
federal political committee.

C

Name of Employer
Edward F Randolph Ins. Ag-
ency

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866656

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Earl A. Thompson, RFC, LUTCF

Mailing Address 21014 Pricewood Manor Ct.

City

Cypress

State

TX

Zip Code

77433

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866662

Amount of Each Receipt this Period

47.00

C.

Full Name (Last, First, Middle Initial)

Mr. John W. Wheeler, Jr.

Mailing Address 1075 Aster Ln.

City

West Chicago

State

IL

Zip Code

60185

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866671

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

131.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Gary M. Owens, LUTCF

Mailing Address PO Box 835

City

Sultan

State

WA

Zip Code

98294

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Insurance & Finan-
cial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866675

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Mr. A. Duer Pierce, Jr.

Mailing Address 5818 Kennett Pike

City

Wilmington

State

DE

Zip Code

19807

FEC ID number of contributing
federal political committee.

C

Name of Employer
Financial House

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866684

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. L. Nelson Wingert, CLU

Mailing Address 418 Gettysburg Pike

City

Mechanicsburg

State

PA

Zip Code

17055

FEC ID number of contributing
federal political committee.

C

Name of Employer
Anchor Financial Group

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866685

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

92.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Ames D. Stetzler

Mailing Address 10804 W. 123rd Terrace

City

Overland Park

State

KS

Zip Code

66213

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Resource Group, L.C.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866690

Amount of Each Receipt this Period

18.00

B.

Full Name (Last, First, Middle Initial)

Mr. Michael G. Murphy, LUTCF

Mailing Address 1014 S. 54th St.

City

Omaha

State

NE

Zip Code

68106

FEC ID number of contributing
federal political committee.

C

Name of Employer
Grace/Mayer Insurance

Occupation

Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866708

Amount of Each Receipt this Period

28.00

C.

Full Name (Last, First, Middle Initial)

Mr. Ian C. Wilkinson, LUTCF

Mailing Address PO Box 7096

City

Macon

State

GA

Zip Code

31209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wilkinson & Associates

Occupation

Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866710

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

71.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Stephen J. Quiner, CLU, ChFC

Mailing Address 6832 Morningside Circle

City

Johnston

State

IA

Zip Code

50131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coleman/Quiner, Ltd.

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866720

Amount of Each Receipt this Period

18.00

B.

Full Name (Last, First, Middle Initial)

Mr. James E. Mitchell, LUTCF, CTP

Mailing Address 2209 Ontario

City

Bellingham

State

WA

Zip Code

98229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Financial Se-
rvices

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866727

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Mr. Garry L. Phipps

Mailing Address N1390 Sauk Trail Rd.

City

Oostburg

State

WI

Zip Code

53070

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Family Life Insu-
rance Company

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866742

Amount of Each Receipt this Period

18.00

SUBTOTAL of Receipts This Page (optional)

96.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John E. Raley, LUTCF

Mailing Address 15 Wildberry LN NE

City

Iowa City

State

IA

Zip Code

52240

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Family Life Insu-
rance Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Insurance Agent

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866743

Amount of Each Receipt this Period

18.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert W. Rensing, LUTCF

Mailing Address 2515 S. 105th Ave

City

Omaha

State

NE

Zip Code

68124

FEC ID number of contributing
federal political committee.

C

Name of Employer
Robert Rensing Agency, Inc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

President/Owner

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866746

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael A. Riffenburg, LUTCF

Mailing Address 5111 Borman Drive

City

Spartanburg

State

SC

Zip Code

29301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riffenburg Insurance Serv-
ices, LLC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agency Owner

Aggregate Year-to-Date ▼

313.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866747

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

81.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Jaime Resendez, LUTCF

Mailing Address 1389 W. US Hwy. 77, Suite A

City

San Benito

State

TX

Zip Code

78586

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Life Ins. Co./IL

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866751

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. John F. Ridoux

Mailing Address 911 Thorpe Drive

City

Louisville

State

KY

Zip Code

40243

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Life Ins. Co./IL

Occupation

Agency Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866755

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Styrkowicz, CLU, LUTCF

Mailing Address 25 Monterey Drive

City

Vernon Hills

State

IL

Zip Code

60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance

Occupation

Exclusive Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866756

Amount of Each Receipt this Period

65.00

SUBTOTAL of Receipts This Page (optional)

111.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas D. Voshall

Mailing Address 426 Towne Valley Dr

City

Woodstock

State

GA

Zip Code

30188

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vineyard Financial Develo-
pment

Occupation

Financial Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866769

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Marvin L. Spreen, FIC

Mailing Address 5759 Mount Vernon Rd

City

Brenham

State

TX

Zip Code

77833

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thrivent Financial for Lu-
therans

Occupation

Financial Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866771

Amount of Each Receipt this Period

26.00

C.

Full Name (Last, First, Middle Initial)

Mr. Richard Roy, RHU, LUTCF

Mailing Address 103 Fourth Street

City

Middlesex

State

NJ

Zip Code

08846

FEC ID number of contributing
federal political committee.

C

Name of Employer
Roy Agency

Occupation

BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.20

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866786

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

66.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Sherri A. Rush, LUTCF

Mailing Address 2140 Jefferson St Suite C

City

Napa

State

CA

Zip Code

94559

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pathway Fin. & Ins. Svcs.-
LLC

Occupation

Registered Rep.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866787

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Bradley W. Pratt, CLU, LUTCF

Mailing Address 2118 Peregrine Lane

City

Mankato

State

MN

Zip Code

56003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pratt Kutzke & Associates
LLP

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866811

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Irv Wiese, CLU, ChFC,

Mailing Address 318 Stamford Bridge Rd

City

Columbia

State

SC

Zip Code

29212

FEC ID number of contributing
federal political committee.

C

Name of Employer
MW Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866814

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

92.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John Palladino, Jr.

Mailing Address 15060 Becky Lane

City

Monte Sereno

State

CA

Zip Code

95030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Link-Allen Benefit Group

Occupation
V.P

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866822

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Clinton J. Parks

Mailing Address 4848 Rivervale St Rt

City

Soquel

State

CA

Zip Code

95073

FEC ID number of contributing
federal political committee.

C

Name of Employer
Clinton J. Parks Ins. Ser-
vs

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866823

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Ms. Debra N. Smith

Mailing Address 1345 Cedar Park Pl

City

Stone Mountain

State

GA

Zip Code

30083

FEC ID number of contributing
federal political committee.

C

Name of Employer
PORTAMEDIC

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866837

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

89.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James John Silbernagel, LUTCF, CFP

Mailing Address W 2329 Capital Drive

City

Campbellsport

State

WI

Zip Code

53010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Silbernagel & Jasen Finan-
cial

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866840

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

Mr. Allan B. Schon

Mailing Address 441 16th NW

City

Minot

State

ND

Zip Code

58703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive Financial

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866853

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Ms. Rita J. Robinson, RN, BSN

Mailing Address 3777 Parkwood Way

City

West Linn

State

OR

Zip Code

97068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Robinson Financial Group

Occupation
General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866876

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

111.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph E. Pittman

Mailing Address 7430 Vinton Street

City

Omaha

State

NE

Zip Code

68124

FEC ID number of contributing
federal political committee.

C

Name of Employer
Creative Association Mana-
gement

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866880

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Alan R. Zalewski, CLU, ChFC,

Mailing Address 6908 North 27th Street

City

Tacoma

State

WA

Zip Code

98407

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burnley Wilson Associates

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866887

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Ms. Sharon L. Sparling, CIC

Mailing Address P.O. Box 1914

City

Mount Vernon

State

WA

Zip Code

98273

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

PRODUCER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866892

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

116.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Lane Boozer

Mailing Address 1400 N Corinth St Ste 109

City State Zip Code
 Corinth TX 76208

FEC ID number of contributing
federal political committee.

C

Name of Employer
Don Boozer & Assoc.

Occupation
Vice President - Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866908

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. George F. Griffin, LUTCF, CLF

Mailing Address P.O. Box 31939 St. Andrews Br.

City State Zip Code
 Charleston SC 29417

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Insurance Co. of
America

Occupation
Sr. District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866942

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. C. Robert Brown, Sr.

Mailing Address 8675 WestCott

City State Zip Code
 Germantown TN 38138

FEC ID number of contributing
federal political committee.

C

Name of Employer
UCL Financial Group

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866949

Amount of Each Receipt this Period

62.50

SUBTOTAL of Receipts This Page (optional)

137.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Ernestine S. Cohn, CSA

Mailing Address 1773 139th Avenue

City

San Leandro

State

CA

Zip Code

94578

FEC ID number of contributing
federal political committee.

C

Name of Employer
Robinson - Cohn & Co. Ins-
urance Agency

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866952

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. J. Blayne Bird

Mailing Address 315 Willow Drive

City

Blackfoot

State

ID

Zip Code

83221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Archibald Insurance Center

Occupation
Financial Services Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866953

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Lynda Lea Hopkins, CIC

Mailing Address 8320 Hidden Drive

City

Middleville

State

MI

Zip Code

49333

FEC ID number of contributing
federal political committee.

C

Name of Employer
Professionals Direct Insu-
rance Service

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866963

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

66.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Richard E. Keeling

Mailing Address 9507 Wessex PI

City

Louisville

State

KY

Zip Code

40222

FEC ID number of contributing
federal political committee.

C

Name of Employer
Transamerica Occidental

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866965

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Mr. Melville D.K. Jones

Mailing Address P.O. Box 1391

City

Puunene

State

HI

Zip Code

96784

FEC ID number of contributing
federal political committee.

C

Name of Employer
Transamerica Life Insurance
Companies

Occupation

Branch Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866967

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Ronald L. Gay, LUTCF

Mailing Address 3000 Briarcrest Ste. 422

City

Bryan

State

TX

Zip Code

77802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Scott & White Health Plan

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866976

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

76.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Daniel C. Bell

Mailing Address P. O. Box 1747

City

Cleveland

State

MS

Zip Code

38732

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5866996

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Darrel V. Hovde

Mailing Address PO Box 1806

City

Minot

State

ND

Zip Code

58702

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation
General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867002

Amount of Each Receipt this Period

30.60

C.

Full Name (Last, First, Middle Initial)

Mr. Michael C. Herring

Mailing Address 9550 N 150th Ct

City

Waverly

State

NE

Zip Code

68462

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867013

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

78.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James Walter Brown, LUTCF

Mailing Address 6334 Deveron Drive

City

Charlotte

State

NC

Zip Code

28211

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.20

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867028

Amount of Each Receipt this Period

23.10

B.

Full Name (Last, First, Middle Initial)

Mr. William A. Hume, LUTCF

Mailing Address 1075 Woodfield Lane

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867033

Amount of Each Receipt this Period

42.50

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas K. Kilton

Mailing Address 1933 E River Pkwy

City

Minneapolis

State

MN

Zip Code

55414-3675

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867052

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

86.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Gwynn M. Blair, LUTCF

Mailing Address 715 Fernwood Drive

City

Brooksville

State

FL

Zip Code

34601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Florida Farm Bureau Life
Ins.

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867070

Amount of Each Receipt this Period

17.50

B.

Full Name (Last, First, Middle Initial)

Mr. Vernon McFalls, LUTCF

Mailing Address 100 Valley Meadow Lane

City

Searcy

State

AR

Zip Code

72143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southern Farm Bureau Life
Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867077

Amount of Each Receipt this Period

19.20

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas E. Cook

Mailing Address 2700 Calvert

City

Lincoln

State

NE

Zip Code

68502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cook Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867095

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

59.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John B. Kearns, LUTCF

Mailing Address 1802 First Ave

City

Scottsbluff

State

NE

Zip Code

69361

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jolliffe Capital, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867097

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Mr. Kim L. Christenson

Mailing Address 180 SW Gibson Lane

City

Issaquah

State

WA

Zip Code

98027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life Insurance Co-
mpany

Occupation

Field Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867098

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Gates, LUTCF

Mailing Address 94 Pine Glen Rd.

City

Langhorne

State

PA

Zip Code

19047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance

Occupation

Exclusive Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867106

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mrs. Evelyn Butler, CLTC, LUTC

Mailing Address 10 Lincoln Ave.

City

Vernon

State

NJ

Zip Code

07462

FEC ID number of contributing
federal political committee.

C

Name of Employer
Certified Financial Servi-
ces, LLC

Occupation

Field Representative

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867115

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Mr. Terry L. Poynor, LUTCF

Mailing Address 1220 N Prince St

City

Clovis

State

NM

Zip Code

88101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmers Insurance Group

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

244.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867135

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Wells, LUTCF

Mailing Address 18830 Los Hermanos Ranch Rd

City

Valley Center

State

CA

Zip Code

92082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmers Financial Services

Occupation

Owner/Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

757.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867136

Amount of Each Receipt this Period

47.50

SUBTOTAL of Receipts This Page (optional)

97.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Walter M. Schieffer, Jr., LUTCF

Mailing Address 17501 John Wayne

City State Zip Code
Perry OK 73077

FEC ID number of contributing
federal political committee.

C

Name of Employer
Schieffer & Schieffer, In-
c.

Occupation
President/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867139

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Mr. William E. Riley

Mailing Address 715 N. Washington Blvd., Suite D

City State Zip Code
Sarasota FL 34236

FEC ID number of contributing
federal political committee.

C

Name of Employer
W. E. Riley and Associates

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867151

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Harry E. Sechman

Mailing Address 13 Beechwood Dr

City State Zip Code
Rutland MA 01543

FEC ID number of contributing
federal political committee.

C

Name of Employer
H.E. Sechman Retirement
Planning

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867152

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Benjamin Bunn Woodard, Jr.

Mailing Address 109 Bristol Court

City

Rocky Mount

State

NC

Zip Code

27803

FEC ID number of contributing
federal political committee.

C

Name of Employer
AXA Advisors

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867158

Amount of Each Receipt this Period

46.75

B.

Full Name (Last, First, Middle Initial)

Ms. Linda S. Harris

Mailing Address PO Box 261669

City

San Diego

State

CA

Zip Code

92196

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harris Ins & Financial Se-
rvices

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867180

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Mr. A. Christopher Engle, LUTC

Mailing Address 4485 Orchard Creek Ct S E

City

Kentwood

State

MI

Zip Code

49546

FEC ID number of contributing
federal political committee.

C

Name of Employer
Argus Financial Consultan-
ts

Occupation

Certified Financial Planner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867192

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

94.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Eleanor B. Blaylock

Mailing Address 9439 Gay Lane

City

State

Zip Code

Oil City

LA

71061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burke & Burke Insurance
Mktg. Inc.

Occupation

Agency Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867193

Amount of Each Receipt this Period

62.50

B.

Full Name (Last, First, Middle Initial)

Mr. Michael R. James

Mailing Address 107 Ingleside East Dr.

City

State

Zip Code

Madison

MS

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867197

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Donald A. Frost, PGA

Mailing Address 612 A N. Pageant Drive

City

State

Zip Code

Orange

CA

92869

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shorepoint Insurance Serv-
ices

Occupation

Vice_President Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867207

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

104.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Kevin K. Burckhard

Mailing Address 413-25th Ave NW

City

Minot

State

ND

Zip Code

58703

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867213

Amount of Each Receipt this Period

18.00

B.

Full Name (Last, First, Middle Initial)

Mr. O. Taylor Davis

Mailing Address 104 Hanover Square

City

Lafayette

State

LA

Zip Code

70508

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Louisiana Group

Occupation
Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867221

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Mr. Steven B. Heinz

Mailing Address 1341 E 600 N

City

Orem

State

UT

Zip Code

84097

FEC ID number of contributing
federal political committee.

C

Name of Employer
S. B. HEINZ & ASSOCIATES,
INC.

Occupation
Financial Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867231

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

90.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James R. Goodrich, CLU, ChFC

Mailing Address 1860 Beech

City

Mt. Pleasant

State

MI

Zip Code

48858

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867237

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Mr. James R. Brown, CLU, ChFC,

Mailing Address 1500 Adam Dr

City

Normal

State

IL

Zip Code

61761

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867238

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Todd G. Grantham

Mailing Address 203 Brandermill Drive

City

Durham

State

NC

Zip Code

27713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual Finan-
cial Network

Occupation

Financial Representative

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867243

Amount of Each Receipt this Period

115.50

SUBTOTAL of Receipts This Page (optional)

179.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Carl W. Middleton, III, CLU Ch

Mailing Address 8500 Gordon Dr NE

City

Bain Bridge Is.

State

WA

Zip Code

98110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867247

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Samuel H. Hazleton, IV

Mailing Address 4220 Lakeshore Drive

City

Diamond Point

State

NY

Zip Code

12824

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867252

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Terry A. Boulter, CLU, ChFC,

Mailing Address 9037 N Silver Lake Drive

City

Cedar Hills

State

UT

Zip Code

84062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cambridge Financial Center

Occupation

Branch Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867258

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

85.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James L. McConathy, Jr.

Mailing Address 706 Trenton St., Apt. 6

City

West Monroe

State

LA

Zip Code

71291

FEC ID number of contributing
federal political committee.

C

Name of Employer
MetLife Financial Services

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867293

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Lines Robert Ferguson, Jr.

Mailing Address 500 Virginia St E Ste 1100

City

Charleston

State

WV

Zip Code

25301

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867301

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Joseph Jungen

Mailing Address N81 W23285 Five Iron Way

City

Sussex

State

WI

Zip Code

53089

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867326

Amount of Each Receipt this Period

18.00

SUBTOTAL of Receipts This Page (optional)

93.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Roland G. Barrera

Mailing Address 2621 Camargo

City

Corpus Christi

State

TX

Zip Code

78415

FEC ID number of contributing
federal political committee.

C

Name of Employer
Roland Barrera Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867333

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas F. Levasseur, CLU, CLTC

Mailing Address 9 Hamilton St

City

Somersworth

State

NH

Zip Code

03878

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Beacon Financial Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867365

Amount of Each Receipt this Period

12.50

C.

Full Name (Last, First, Middle Initial)

Mr. Curtis L. Matlin, CLU

Mailing Address 707 Skokie Blvd. #700

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867367

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

58.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Michael V. May, CLU, ChFC,

Mailing Address P O Box 910

City

State

Zip Code

Port Richey

FL

34673

FEC ID number of contributing
federal political committee.

C

Name of Employer
May & Associates Agency,
Inc.

Occupation

Career Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867379

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jaford D. Burgad, LUTCF

Mailing Address 3842 N. 10th St.

City

State

Zip Code

Fargo

ND

58102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mutual of Omaha Companies

Occupation

Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867390

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Mr. Harlynn N. Bjerke, LUTCF

Mailing Address P. O. Box 144

City

State

Zip Code

Adams

ND

58210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mutual of Omaha Companies

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867391

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Jon P. Kubler, LUTCF

Mailing Address 1620 N. 127th St

City

Omaha

State

NE

Zip Code

68154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Asset Strategies

Occupation
Sales Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867393

Amount of Each Receipt this Period

22.50

B.

Full Name (Last, First, Middle Initial)

Mr. Steven Dwayne Gifford

Mailing Address P.O. Box 5027

City

Ashland

State

KY

Zip Code

41105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mutual of Omaha Companies

Occupation
General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867399

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Milburn, LUTCF

Mailing Address 2332 Flagstaff Dr.

City

Longmont

State

CO

Zip Code

80501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mutual of Omaha Companies

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867400

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

70.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Dennis L. Helgeson, CLU,ChFC,L

Mailing Address 2601 Bel Air Drive

City

Minot

State

ND

Zip Code

58703

FEC ID number of contributing
federal political committee.

C

Name of Employer
North American Company

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867417

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Mr. Albert T. Hurst, Jr.,FICF,C

Mailing Address 1901 S. Broadway St.

City

Little Rock

State

AR

Zip Code

72206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Modern Woodmen of America

Occupation

Agency Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867420

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel L. Lawrence

Mailing Address 5553 Peters Drive

City

West Bend

State

WI

Zip Code

53095

FEC ID number of contributing
federal political committee.

C

Name of Employer
Modern Woodmen of America

Occupation

Agency Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867425

Amount of Each Receipt this Period

51.00

SUBTOTAL of Receipts This Page (optional)

101.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Casey C. Knake, CLU, ChFC

Mailing Address 2902 Mach I Dr.

City

Norfolk

State

NE

Zip Code

68701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heritage Financial Services, L.L.C.

Occupation

Investment Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867427

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas W. Dzik, CLU, ChFC

Mailing Address 530 Dodge Lane

City

St. Paul

State

MN

Zip Code

55118

FEC ID number of contributing
federal political committee.

C

Name of Employer
North Star Resource Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867428

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jerry E. Jensen, LUTCF

Mailing Address 190 So. 800 W.

City

Blackfoot

State

ID

Zip Code

83221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jensco, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867430

Amount of Each Receipt this Period

50.40

SUBTOTAL of Receipts This Page (optional)

117.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Timothy J. Brungardt, LUTCF

Mailing Address 314 N. 5th.

City

Norfolk

State

NE

Zip Code

68701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heritage Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867431

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Chandik, CLU, ChFC

Mailing Address 42 Ritz Cove Drive

City

Dana Point

State

CA

Zip Code

92629

FEC ID number of contributing
federal political committee.

C

Name of Employer
Financial Diligence Partners

Occupation

Agent/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867432

Amount of Each Receipt this Period

105.00

C.

Full Name (Last, First, Middle Initial)

Mr. Fred Kazmierski, CLU, LUTCF

Mailing Address 1116 Grand Ave Ste 204

City

Billings

State

MT

Zip Code

59102

FEC ID number of contributing
federal political committee.

C

Name of Employer
MMA Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867436

Amount of Each Receipt this Period

27.00

SUBTOTAL of Receipts This Page (optional)

157.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Gregory A. Dorsch

Mailing Address 18608 E 25th Terr Crt

City

Independence

State

MO

Zip Code

64057

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heartland Capital Advisors

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867482

Amount of Each Receipt this Period

18.00

B.

Full Name (Last, First, Middle Initial)

Mr. Daniel D. Duren, CLU, ChFC, L

Mailing Address 6537 S. 34th Street

City

Lincoln

State

NE

Zip Code

68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Benefit Management

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867491

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Ms. Jeri L. Regan, CLU, ChFC,

Mailing Address 2616 No. 100th Avenue

City

Omaha

State

NE

Zip Code

68134

FEC ID number of contributing
federal political committee.

C

Name of Employer
MassMutual Financial Group

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867492

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

48.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. F. Nicholas Kelley, CLU

Mailing Address 1323 S. 174 St.

City

Omaha

State

NE

Zip Code

68130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kelley Financial Services,
Inc

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867493

Amount of Each Receipt this Period

22.50

B.

Full Name (Last, First, Middle Initial)

Ms. Queenie M. Chee, CLU, LUTCF

Mailing Address 833 Waika Place

City

Honolulu

State

HI

Zip Code

96825

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Principal Financial
Group

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867494

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Delford G. Britton

Mailing Address 1736 Jefferson Street

City

Napa

State

CA

Zip Code

94559

FEC ID number of contributing
federal political committee.

C

Name of Employer
MassMutual Financial Group

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867495

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

85.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Archie F. Lowe, CLU

Mailing Address 38 Old Ivy Road, Suite 200

City

Atlanta

State

GA

Zip Code

30342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Peachtree Benefit Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867501

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Ms. Jill H. Clark, LUTCF, CFC

Mailing Address 201 39th Street

City

West Des Moines

State

IA

Zip Code

50265

FEC ID number of contributing
federal political committee.

C

Name of Employer
Compensation Designs

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867508

Amount of Each Receipt this Period

18.00

C.

Full Name (Last, First, Middle Initial)

Mr. Henry Donaghy, LUTCF, CLU,

Mailing Address 400 North Church Street
208

City

Charlotte

State

NC

Zip Code

28202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mass Mutual

Occupation

Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.20

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867516

Amount of Each Receipt this Period

23.10

SUBTOTAL of Receipts This Page (optional)

62.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Rick L. Frank

Mailing Address 415 S Maple
PO Box 574

City State Zip Code
Paullina IA 51046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frank Financial Group

Occupation
Independent Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.60

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867532

Amount of Each Receipt this Period

9.00

B.

Full Name (Last, First, Middle Initial)

Mr. Steve L. Hampton, LUTCF

Mailing Address P.O. Box 319

City State Zip Code
Upton WY 82730

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hampton Insurance & Finan-
cial Services

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867537

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. James J. Dinsmore, CLU, LUTCF

Mailing Address 104 Lehman Drive

City State Zip Code
Cogan Station PA 17728

FEC ID number of contributing
federal political committee.

C

Name of Employer
Liberty Mutual Insurance
Co

Occupation
Exec. Sales Rep.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867577

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

51.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph J. Maltese, CFP

Mailing Address 4176 Arikakee Court

City

Jacksonville

State

FL

Zip Code

32223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Della Porta

Occupation

Investment Advisor Rep.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867592

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Timothy P. S. Birdwell, LUTCF

Mailing Address 3601 Parkway Terrace

City

Bryan

State

TX

Zip Code

77802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Birdwell Financial Services

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867604

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Samuel B. James, LUTCF

Mailing Address 6410 Shady Lane

City

Fayetteville

State

NC

Zip Code

28304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lincoln National Life. Ins.

Occupation

Special Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867615

Amount of Each Receipt this Period

19.25

SUBTOTAL of Receipts This Page (optional)

82.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Chandik, MBA

Mailing Address 1332 Shorebird Ln

City State Zip Code
 Carlsbad CA 92011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jefferson Pilot Financial

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867617

Amount of Each Receipt this Period

47.50

B.

Full Name (Last, First, Middle Initial)

Mr. Richard D. Kimmel

Mailing Address 6525 Bellaire Drive S

City State Zip Code
 Ft Worth TX 76132

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southwest Business Center

Occupation
Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867650

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. James T. Bardin, CLU, ChFC

Mailing Address 4226 Fairway Circle

City State Zip Code
 Tampa FL 33624

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Principal Financial
Group

Occupation
Business Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867657

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Terry K. Headley, LUTCF, LIC

Mailing Address 20704 Meadow Ridge Dr

City

Springfield

State

NE

Zip Code

68059

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Principal Financial
Group

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867661

Amount of Each Receipt this Period

208.00

B.

Full Name (Last, First, Middle Initial)

Mr. Richard B. Jacobs, LUTCF

Mailing Address 5396 Painted Sunrise Dr.

City

Las Vegas

State

NV

Zip Code

89149

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Financial Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867665

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Ms. Jill M. Douglass, LUTCF

Mailing Address 2932 Sunstone St.

City

Las Vegas

State

NV

Zip Code

89128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Insurance & Finan-
cial Services

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867681

Amount of Each Receipt this Period

27.00

SUBTOTAL of Receipts This Page (optional)

260.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. George M. Dudikoff, LUTCF

Mailing Address 12897 Quail Hollow Dr

City

Fairfield

State

CA

Zip Code

94534

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmers Insurance Group

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867685

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Dennis L. Miller, LUTCF, CLU

Mailing Address 649 State Road
P.O. Box 186

City

Vassar

State

MI

Zip Code

48768

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farm Bureau Life Ins Co/MI

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867690

Amount of Each Receipt this Period

42.50

C.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Hollander, LUTCF

Mailing Address 904 Rockhurst Dr.

City

Lincoln

State

NE

Zip Code

68510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farm Bureau Insurance Ser-
vices

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867701

Amount of Each Receipt this Period

112.50

SUBTOTAL of Receipts This Page (optional)

176.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Lawrence P. Decker, ChFC

Mailing Address 11944 Treat Hwy

City

Jasper

State

MI

Zip Code

49248

FEC ID number of contributing
federal political committee.

C

Name of Employer

GORKOWSKI, DECKER & BROWN

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867705

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Lebert Andre Howes, Jr., CLU

Mailing Address 10 South Jefferson St. Ste. 850

City

Roanoke

State

VA

Zip Code

24011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Axa Advisors, LLC

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867714

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Milton Adelman

Mailing Address 37 Eldwick Court

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing
federal political committee.

C

Name of Employer

AXA Advisors, LLC

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867720

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

61.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Michael D. Harris, LUTCF

Mailing Address 11695 US HWY 45N

City

Ozark

State

IL

Zip Code

62972

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Insurance & Finan-
cial Services

Occupation

Owner/Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867729

Amount of Each Receipt this Period

22.50

B.

Full Name (Last, First, Middle Initial)

Mr. Robert M. Burd

Mailing Address 22 Cedarwood Dr

City

Watseka

State

IL

Zip Code

60970

FEC ID number of contributing
federal political committee.

C

Name of Employer
Country Insurance & Finan-
cial Services

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867734

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. James W. Goodacre II, RHU, REBC

Mailing Address 10407 Fairway Lane

City

Carmel

State

CA

Zip Code

93923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867766

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

64.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James R. Christensen, Jr.

Mailing Address 440 Regency Pkwy Dr #139

City

Omaha

State

NE

Zip Code

68114

FEC ID number of contributing
federal political committee.

C

Name of Employer
INSOURCE, Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867779

Amount of Each Receipt this Period

105.00

B.

Full Name (Last, First, Middle Initial)

Mr. Allen L. Dennis, LUTCF

Mailing Address 3145 Heatheridge Lane

City

Reno

State

NV

Zip Code

89509

FEC ID number of contributing
federal political committee.

C

Name of Employer
American National Insuran-
ce Company

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867799

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jonathan David Haymes, LUTCF

Mailing Address 1230 s. hickory lane

City

Nixa

State

MO

Zip Code

65714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Haymes Insurance Agency

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867800

Amount of Each Receipt this Period

25.20

SUBTOTAL of Receipts This Page (optional)

151.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Berg, CLU, LUTCF

Mailing Address 1405 Blackberry Lane

City

Stevens Point

State

WI

Zip Code

54481

FEC ID number of contributing
federal political committee.

C

Name of Employer
Planning Concepts Inc.

Occupation

Sales Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867811

Amount of Each Receipt this Period

36.00

B.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Hiller, ChFC

Mailing Address W267 S7930 Stony Pt. Ct.

City

Mukwonago

State

WI

Zip Code

53149

FEC ID number of contributing
federal political committee.

C

Name of Employer
Central Financial Services

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867812

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Ms. Carolyn S. Miller, LUTCF

Mailing Address 2469 W. Rosebush Rd

City

Weidman

State

MI

Zip Code

48893

FEC ID number of contributing
federal political committee.

C

Name of Employer
General Agency Company

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867845

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

82.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John Everett, LUTCF

Mailing Address 531 Daniel

City

Santa Maria

State

CA

Zip Code

93454

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Life Ins. Co./IL

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867852

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Ms. Rosa K. Dominy

Mailing Address 4015-J Washington Rd

City

Martinez

State

GA

Zip Code

30907

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Life Ins. Co./IL

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867854

Amount of Each Receipt this Period

25.50

C.

Full Name (Last, First, Middle Initial)

Mr. Roger W. Hassler, LUTCF

Mailing Address 22593 Counrty View De

City

San Jose

State

CA

Zip Code

95120

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Life Ins. Co./IL

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867855

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

88.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mrs. Patricia S. Lucas, CLU,CLTC,L

Mailing Address 8375 Starlight Lane

City

Boones Mill

State

VA

Zip Code

24065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greystone Financial Group

Occupation

Financial Services Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867858

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Michael T. McCuiston, LUTCF

Mailing Address 5328 Godas Circle

City

Columbia

State

MO

Zip Code

65202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fidelity Financial Services

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867869

Amount of Each Receipt this Period

18.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert C. Altenburg, FIC,LUTCF

Mailing Address 558 W. 9th Street

City

Winner

State

SD

Zip Code

57580

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thrivent Financial for Lutherans

Occupation

Regional Support Assoc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867887

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Glenn P. Deal, Jr.

Mailing Address 58 Golf Course Ln.

City

Taylorsville

State

NC

Zip Code

28681

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thrivent Financial for Lu-
therans

Occupation

Financial Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.25

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867889

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Mr. John G. Brandt, LUTCF, FIC

Mailing Address 2103 Sunset Lane

City

La Crosse

State

WI

Zip Code

54601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.30

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867891

Amount of Each Receipt this Period

5.10

C.

Full Name (Last, First, Middle Initial)

Mr. Richard L. Miller

Mailing Address 1214 Karr Ave.

City

Yakima

State

WA

Zip Code

98902

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual Finan-
cial Network

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867906

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

85.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Juli Y. McNeely, LUTCF, CFP

Mailing Address S764 Hanson Road

City

Spencer

State

WI

Zip Code

54479

FEC ID number of contributing
federal political committee.

C

Name of Employer
McNeely Financial Services
Inc

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867924

Amount of Each Receipt this Period

51.00

B.

Full Name (Last, First, Middle Initial)

Ms. Linda J. Melson, LUTCF, CLU

Mailing Address 1810 W. Illinois

City

Midland

State

TX

Zip Code

79701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Melson and Associates

Occupation

OWNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867946

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Frederick L. Granados, LUTCF, FSS

Mailing Address 1145 Davis Avenue

City

Concord

State

CA

Zip Code

94518

FEC ID number of contributing
federal political committee.

C

Name of Employer
F L Granados Financial Se-
rvices

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867955

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

114.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Douglas Austin, CLU

Mailing Address Suite 9 Kite Hill Rd

City

Santa Cruz

State

CA

Zip Code

95060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Austin Ins & Financial Se-
rv

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867962

Amount of Each Receipt this Period

22.50

B.

Full Name (Last, First, Middle Initial)

Mr. Keith M. Gillies, CLU, ChFC,

Mailing Address 109 W. Lakeview Dr.

City

La Place

State

LA

Zip Code

70068

FEC ID number of contributing
federal political committee.

C

Name of Employer
River Parishes Advisors
Group, LLC

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867970

Amount of Each Receipt this Period

62.50

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas D. McNeil

Mailing Address 49 Hagen Oaks Ct

City

Alamo

State

CA

Zip Code

94507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Midland National Life

Occupation
Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867976

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Katharine F. Clark

Mailing Address 110 Cross Creek Circle

City

Macon

State

GA

Zip Code

31210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Peachtree Planning

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867981

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ms. Barbara E. Gunnell, LUTCF

Mailing Address 94903 Country Ln.

City

Coos Bay

State

OR

Zip Code

97420

FEC ID number of contributing
federal political committee.

C

Name of Employer
Community Financial Serv.,
LLC

Occupation

State One Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867985

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Roger W. Garrett

Mailing Address 2201 Woodlawn Road
P O Box 370

City

Lincoln

State

IL

Zip Code

62656

FEC ID number of contributing
federal political committee.

C

Name of Employer
R. W. Garrett Agency Inc.

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867989

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Stephen R. McNeely, CLU,ChFC,L

Mailing Address 6190 Winford Dr

City

Indianapolis

State

IN

Zip Code

46236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Motorists Life Ins. Co.

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5867992

Amount of Each Receipt this Period

22.50

B.

Full Name (Last, First, Middle Initial)

Mr. Michael E. Behar

Mailing Address 2319 Cheshire Woods Rd

City

Toledo

State

OH

Zip Code

43617

FEC ID number of contributing
federal political committee.

C

Name of Employer
Behar and Associates

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868000

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Ms. Amy K. Byrne

Mailing Address 900 N Shoreline Blvd

City

Mountain View

State

CA

Zip Code

94043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vita Insurance Associates,
Inc.

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868013

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Leonard Martin, CSA

Mailing Address 98 Tennyson Rd

City

Warwick

State

RI

Zip Code

02888

FEC ID number of contributing
federal political committee.

C

Name of Employer
Martin & Associates

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868035

Amount of Each Receipt this Period

50.40

B.

Full Name (Last, First, Middle Initial)

Mr. Robert T. MacDonald

Mailing Address 1931 N 73rd St.

City

Wauwatosa

State

WI

Zip Code

53213

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmers Financial Services

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868043

Amount of Each Receipt this Period

27.00

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel R. Gehl, CLU,ChFC,

Mailing Address 28927 42nd Avenue

City

Paw Paw

State

MI

Zip Code

49079

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ronald B. Wiser & Associa-
tes

Occupation
General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868050

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

102.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Michele A. Kobielnik, LUTCF, CPI

Mailing Address 1809 Amos Circle

City

Pensacola

State

FL

Zip Code

32526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Affiliated Insurance

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868054

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Ms. Sandra E. Henderson, RHU, CSA

Mailing Address 207 E Moody Ave

City

Fresno

State

CA

Zip Code

93720

FEC ID number of contributing
federal political committee.

C

Name of Employer
Health Guard

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868070

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey P. Case, LUTCF

Mailing Address 1311 33rd Avenue S.W.

City

Minot

State

ND

Zip Code

58701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Case Financial Services
Inc

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868075

Amount of Each Receipt this Period

27.00

SUBTOTAL of Receipts This Page (optional)

70.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. David T. Koppa, CLU, LUTCF

Mailing Address 1105 Via Bolzano

City

Santa Barbara

State

CA

Zip Code

93111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cornerstone Insurance Ser-
vices

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868086

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Ms. Robelynn H. Abadie

Mailing Address 4933 Antioch Blvd.

City

Baton Rouge

State

LA

Zip Code

70817

FEC ID number of contributing
federal political committee.

C

Name of Employer
Abadie Financial Services

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868087

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Ables, LUTCF

Mailing Address PO Box 2205

City

Avila Beach

State

CA

Zip Code

93424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Michael Ables Insurance
Services

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868088

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

168.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Peter K. Howard, LUTCF, ChFC

Mailing Address 326 Rosemary Lane

City

Danville

State

VA

Zip Code

24541

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tower Square Securities

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868092

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Mr. William D. Burke, CLU, CFP(r)

Mailing Address 2216 Nelda Way

City

Alamo

State

CA

Zip Code

94507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Life

Occupation

Regional Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868095

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. David M. Koll, LUTCF

Mailing Address 1612 S. 152nd Street

City

Omaha

State

NE

Zip Code

68144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mutual of Omaha

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868109

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

141.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Mitchell W. Ostrove, CLU, ChFC

Mailing Address 4 New King Street

City

White Plains

State

NY

Zip Code

10604

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Ostrove Group Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868113

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. R. Jan Pinney, CLU, ChFC,

Mailing Address 5152 Ellington Court

City

Granite Bay

State

CA

Zip Code

95746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pinney Insurance Center,
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868120

Amount of Each Receipt this Period

208.00

C.

Full Name (Last, First, Middle Initial)

Mr. Brian Counterman, LUTCF

Mailing Address 7893 W. Quarto Ave.

City

Littleton

State

CO

Zip Code

80128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Counterman

Occupation

Owner/Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868126

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

271.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas C. Besselman

Mailing Address 6421 Perkins Rd #2B

City

Baton Rouge

State

LA

Zip Code

70808

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Besselman & Little Ag-
ency

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868132

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher D. Campbell, CLU, ChFC

Mailing Address 2511 Brandon Road

City

Upper Arlington

State

OH

Zip Code

43221

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phoenix Companies

Occupation
Executive Benefits Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868148

Amount of Each Receipt this Period

4.25

C.

Full Name (Last, First, Middle Initial)

Mr. David G. Klemisch, LUTCF

Mailing Address 2801 26th Ave SW

City

Fargo

State

ND

Zip Code

58103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Klemisch Agency

Occupation
General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868159

Amount of Each Receipt this Period

51.00

SUBTOTAL of Receipts This Page (optional)

105.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Gregory Lynn Grimes, LUTCF

Mailing Address 2310 Live Oak Ln

City

Columbia

State

MO

Zip Code

65202

FEC ID number of contributing
federal political committee.

C

Name of Employer
APEX Financial, LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868161

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Mr. Richard L. Hoover, LUTCF, RIA

Mailing Address 2920 S. Jones Blvd., #110

City

Las Vegas

State

NV

Zip Code

89146

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hoover and Associates

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-208.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868164

Amount of Each Receipt this Period

72.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert L. French, LUTCF

Mailing Address 4105 Sheridan Lake Road

City

Rapid City

State

SD

Zip Code

57702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Transamerica Life

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868172

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

127.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John A. Forbing

Mailing Address 23209 Charwood PI

City

Diamond Bar

State

CA

Zip Code

91765

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868178

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Russell A. Smith

Mailing Address 22928 San Joaquin Drive East

City

Canyon Lake

State

CA

Zip Code

92587

FEC ID number of contributing
federal political committee.

C

Name of Employer
Torimax Financial Group,
Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868188

Amount of Each Receipt this Period

208.00

C.

Full Name (Last, First, Middle Initial)

Ms. Cecilia H. Carlton, LUTCF

Mailing Address P. O. Box 636

City

Hazlehurst

State

MS

Zip Code

39083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southern Farm Bureau Life
Insurance

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868191

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional)

271.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John C. Johns, LUTCF

Mailing Address 5141 Lilly Rd.

City

Hazlehurst

State

MS

Zip Code

39083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southern Farm Bureau Life
Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868193

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph M. Partise, CLU

Mailing Address 3540 Fern Circle

City

Seal Beach

State

CA

Zip Code

90740

FEC ID number of contributing
federal political committee.

C

Name of Employer
Joe Partise, CLU & Assoc.

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868205

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Harold A. Gillet, LUTCF

Mailing Address 8711 Mashie Lane

City

Missoula

State

MT

Zip Code

59808

FEC ID number of contributing
federal political committee.

C

Name of Employer
Security Life of Denver

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868206

Amount of Each Receipt this Period

18.00

SUBTOTAL of Receipts This Page (optional)

81.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. David E. Smithkey, CLU, RFC

Mailing Address 9451 Heddy Drive

City

Flushing

State

MI

Zip Code

48433

FEC ID number of contributing
federal political committee.

C

Name of Employer
Security First Benefits
Corp.

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868207

Amount of Each Receipt this Period

208.00

B.

Full Name (Last, First, Middle Initial)

Ms. April L. Howard

Mailing Address 3386 Williamsburg

City

Boise

State

ID

Zip Code

83706

FEC ID number of contributing
federal political committee.

C

Name of Employer
Howard Insurance Agency

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868210

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Mr. Randall D. Kaufmann

Mailing Address 356 Equus Drive

City

Camp Hill

State

PA

Zip Code

17011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Prudential Financial

Occupation

Special Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868217

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

290.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Dan E. Nicholas, CLU, CLTC

Mailing Address 206 Pacheco Ave

City

Santa Cruz

State

CA

Zip Code

95062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nicholas Insurance & Financial

Occupation

Independent Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868219

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Lawrence Stack, CLU, ChFC,

Mailing Address 28630 Glenbrook Dr

City

Southfield

State

MI

Zip Code

48034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Michigan Financial

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868233

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Mr. Albert B. Brodbeck, CLU

Mailing Address 56 Dundee Road

City

Stamford

State

CT

Zip Code

06903

FEC ID number of contributing
federal political committee.

C

Name of Employer
Prudential Financial

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868244

Amount of Each Receipt this Period

17.50

SUBTOTAL of Receipts This Page (optional)

98.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Theodore J. Zouzounis, CLU

Mailing Address 820 Mariposa Rd

City

Lafayette

State

CA

Zip Code

94549

FEC ID number of contributing
federal political committee.

C

Name of Employer
AXIA Employment Benefit
Insurance Srvc

Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868248

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Mr. William T. Whitmore, Jr., LUTC

Mailing Address P. O. Box 4748

City

Virginia Beach

State

VA

Zip Code

23454

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nationwide Provident

Occupation
Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868249

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Gary H. Pendleton, CLU, ChFC

Mailing Address 2601 Oberlin Rd

City

Raleigh

State

NC

Zip Code

27608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pendleton Financial Consu-
lting, Inc.

Occupation
President/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.96

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868260

Amount of Each Receipt this Period

45.83

SUBTOTAL of Receipts This Page (optional)

138.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Randall H. Jensen

Mailing Address 124 W 46th St., #201

City

Kearney

State

NE

Zip Code

68847

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Principal Financial
Group

Occupation
Sr. Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868266

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas E. Fowler, CLU, LUTCF

Mailing Address 13243 S.E. 51st Place

City

Bellevue

State

WA

Zip Code

98006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fowler Financial Services,
Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868269

Amount of Each Receipt this Period

107.50

C.

Full Name (Last, First, Middle Initial)

Mr. William James DeBruin, LUTCF

Mailing Address 106 Edgewood Ln

City

Combined Locks

State

WI

Zip Code

54113

FEC ID number of contributing
federal political committee.

C

Name of Employer
William J. DeBruin Financial Services,

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868271

Amount of Each Receipt this Period

72.00

SUBTOTAL of Receipts This Page (optional)

200.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Larry J. Winkelhake, CLU, ChFC

Mailing Address 18600 Longview Ct

City

Brookfield

State

WI

Zip Code

53045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mortensen-Winkelhake

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868273

Amount of Each Receipt this Period

90.00

B.

Full Name (Last, First, Middle Initial)

Ms. Teresa L. Seefeldt, RHU

Mailing Address 643 Gaelic Court

City

Apopka

State

FL

Zip Code

32712

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rogers Benefit Group

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868274

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Irwin R. Wetnight, Jr., CLU

Mailing Address 95 W. Prescott Ave.

City

Clovis

State

CA

Zip Code

93619

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Financial Group

Occupation

AGENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868275

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

132.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Sharon L. Hansen

Mailing Address P.O. Box 1249

1219 S Second Street

City

Mt Vernon

State

WA

Zip Code

98273

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heritage Financial Group,-
Inc

Occupation

Financial Professional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868279

Amount of Each Receipt this Period

27.50

B.

Full Name (Last, First, Middle Initial)

Mr. Robert D. Buxbaum, CLU, ChFC

Mailing Address 4 Linwood Rd.

City

Wellesley

State

MA

Zip Code

02181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bay Financial Associates
LLC

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868289

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Walter J. Scott, CLU

Mailing Address 1022 WASHINGTON AVE.

City

OSHKOSH

State

WI

Zip Code

54901

FEC ID number of contributing
federal political committee.

C

Name of Employer
W. F. Coe & Associates,
LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868292

Amount of Each Receipt this Period

50.40

SUBTOTAL of Receipts This Page (optional)

98.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Alan J. Cyr, CLU

Mailing Address 1253 w Rudisill Blvd

City

Fort Wayne

State

IN

Zip Code

46807

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cyr & Cyr Insurance Servi-
ces

Occupation
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868294

Amount of Each Receipt this Period

17.50

B.

Full Name (Last, First, Middle Initial)

Mr. Terry M. Kaltenbach, CLU, ChFC

Mailing Address 1358 Ahlrich Ave

City

Encintas

State

CA

Zip Code

92024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phoenix Life

Occupation
Wealth Management Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868300

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Mr. Paul E. Budke, CLU

Mailing Address 20045 SW Aten Rd

City

Beaverton

State

OR

Zip Code

97007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Paul E. Budke Insurance
Services

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868307

Amount of Each Receipt this Period

17.00

SUBTOTAL of Receipts This Page (optional)

159.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph R. Giangola, CEBS

Mailing Address 1925 Pleasantview

City

Ashtabula

State

OH

Zip Code

44004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Giangola Insurance Agency

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868312

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Shannon J. Enders

Mailing Address 5677 Westwood Drive

City

Muskegon

State

MI

Zip Code

49441

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lakeshore Employee Benefi-
ts

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868316

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. David B. Bianchi, CLU

Mailing Address 1125 Beldon Way

City

Reno

State

NV

Zip Code

89503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868319

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

127.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Carl F. Mehlhop, CLU, ChFC

Mailing Address 89 Van Ripper Ln

City

Orinda

State

CA

Zip Code

94563

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Special Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868328

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. James A. Buchan, CLU, ChFC

Mailing Address 5716 W. Orlando Circle

City

Broken Arrow

State

OK

Zip Code

74011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868334

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Mr. Charles E. Jackson, Jr.

Mailing Address 53 Jordan Lane

City

Mobile

State

AL

Zip Code

36608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868336

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

102.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Staat

Mailing Address 14315 Pine Creek Court, #202

City

Holland

State

MI

Zip Code

49424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual Finan-
cial Network

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868342

Amount of Each Receipt this Period

22.50

B.

Full Name (Last, First, Middle Initial)

Mr. Richard A. Koob, CLU, ChFC,

Mailing Address 301 Frederick Street

City

Waukesha

State

WI

Zip Code

53186

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868345

Amount of Each Receipt this Period

50.40

C.

Full Name (Last, First, Middle Initial)

Mr. Robert M. Roach, CLU, ChFC

Mailing Address 1287 Harrison Pond Drive

City

New Albany

State

OH

Zip Code

43054

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive Planning Systems

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1693.30

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868349

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

197.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Charles D. Zaleski, CLU, ChFC

Mailing Address 28400 Ridgethorpe Ct

City

Rancho Palos Verde

State

CA

Zip Code

90275

FEC ID number of contributing
federal political committee.

C

Name of Employer
Zaleski Ins Svcs Inc

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868353

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Gregory M. Telge, CLU, ChFC

Mailing Address 1655 North River Road

City

Manchester

State

NH

Zip Code

03104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868365

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Anthony D. Miller, CLU, ChFC,

Mailing Address 4502 Hi-Line Dr

City

Billings

State

MT

Zip Code

59106

FEC ID number of contributing
federal political committee.

C

Name of Employer
Anthony D. Miller Financi-
al Group

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868371

Amount of Each Receipt this Period

50.40

SUBTOTAL of Receipts This Page (optional)

113.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John W. Collier, LUTCF

Mailing Address 4600 Kietzke Lane, #134-D

City

Reno

State

NV

Zip Code

89502

FEC ID number of contributing
federal political committee.

C

Name of Employer
American General Financial
Group

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868380

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Mr. Verne D. Brakke, CLU, ChFC,

Mailing Address 624 N Jackson

City

Pierre

State

SD

Zip Code

57501

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868383

Amount of Each Receipt this Period

17.50

C.

Full Name (Last, First, Middle Initial)

Mr. Ken Simons, CLU, ChFC,

Mailing Address 808 Thoroughbred Lane

City

Artesia

State

NM

Zip Code

88210

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.20

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868385

Amount of Each Receipt this Period

50.10

SUBTOTAL of Receipts This Page (optional)

92.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Aldous Kawaiiani Paalani

Mailing Address 2219 Kaululaau Street

City

Honolulu

State

HI

Zip Code

96813

FEC ID number of contributing
federal political committee.

C

Name of Employer
Equity Insurance Services,
Inc

Occupation

Representative

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868388

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Angelo Assad Haddad

Mailing Address 354 Garnsey Ave

City

Bakersfield

State

CA

Zip Code

93309

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation

Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868394

Amount of Each Receipt this Period

42.50

C.

Full Name (Last, First, Middle Initial)

Mr. Gordon T. Colburn

Mailing Address 126 Crystal Springs Road

City

San Dimas

State

CA

Zip Code

91773

FEC ID number of contributing
federal political committee.

C

Name of Employer
Colburn Ins. Services, In-
c.

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868396

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Berge A. Borrevik, CLU, PhD

Mailing Address 10727 North Elma Drive

City

Spokane

State

WA

Zip Code

99218

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868402

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jeffery J. Johnston, CLU

Mailing Address 1425 Lakeside Ct

City

Yakima

State

WA

Zip Code

98902

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868404

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Mr. Dennis A. Brumbaugh, LUTCF

Mailing Address 17 Conley Lane

City

Elma

State

WA

Zip Code

98541

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brumbaugh Insurance Servi-
ces

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868410

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Wayne E. Thomas, CLU, ChFC

Mailing Address 29 Cycas Drive

City

Kenner

State

LA

Zip Code

70065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thomas Financial Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868435

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Barry A. Cook, CLU, ChFC

Mailing Address 509 West Fellars Dr

City

Phoenix

State

AZ

Zip Code

85023

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868445

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas F. Flournoy, Jr., CLU

Mailing Address 5300 Zebulon Rd

City

Macon

State

GA

Zip Code

31210

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868454

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

78.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. M. Jay Einstein, CLU

Mailing Address 59 Margarete Dr.

City

Pittsgrove

State

NJ

Zip Code

08318

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868464

Amount of Each Receipt this Period

72.00

B.

Full Name (Last, First, Middle Initial)

Mr. Arthur Ivan Swanson, LUTCF

Mailing Address 2270 E. 24TH PL

City

Yuma

State

AZ

Zip Code

85365

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868465

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Mr. Troy J. Shreve, CLU

Mailing Address 7100 S 45th Street

City

Lincoln

State

NE

Zip Code

68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Benefit Management

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868482

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

139.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Douglas E. Aycock, CLU, ChFC

Mailing Address 5113 Southwest Pkwy # 200

City

Austin

State

TX

Zip Code

78735

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aycock Financial Group

Occupation

Employee Benefit Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868485

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Mr. H. Larry Fortenberry, CPA, CLU, Ch

Mailing Address 123 Northshore Pt

City

Madison

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive Planning Group

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868486

Amount of Each Receipt this Period

52.50

C.

Full Name (Last, First, Middle Initial)

Mr. Robert P. Freed

Mailing Address 976 Landings Ct

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing
federal political committee.

C

Name of Employer
McCloy Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868490

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

116.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Andre L. Faucher, CLU, ChFC

Mailing Address 46 Osprey Circle

City

Palm Coast

State

FL

Zip Code

32137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Andre L. Faucher CLU

Occupation

Financial Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868493

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. David S. Dickenson, II, CLU, Ch

Mailing Address 7535 Brigham Road

City

Gates Mills

State

OH

Zip Code

44040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dickenson & Associates

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868494

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Ben Kronish, CLU, ChFC,

Mailing Address 205 W 89th St #2H

City

New York

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kronish Associates

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868498

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

88.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John C. Beckwith

Mailing Address 1908 Greenbriar Drive

City State Zip Code

Portage MI 49024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ohio National Fin. Serv-
ices

Occupation
General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868510

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Richard D. Vonderlage, CSA, LUTCF

Mailing Address 15202 Sprague St

City State Zip Code

Omaha NE 68116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heritage Financial Svcs.

Occupation
Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868521

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Carl G. Boutwell, Jr.

Mailing Address 109 Fern Dr

City State Zip Code

Brandon MS 39042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carl Boutwell Agency

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868530

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

106.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James O. Geitgey, LUTCF, FIC

Mailing Address 279 Glenmore Dr.

City

Springfield

State

OH

Zip Code

45503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Geitgey Financial Services

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868545

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Mr. Darren Scott Mason, CLU, ChFC

Mailing Address 178 Shorecliff Rd

City

Corona Del Mar

State

CA

Zip Code

92625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Advanced Benefit Systems

Occupation
General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.92

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868547

Amount of Each Receipt this Period

41.66

C.

Full Name (Last, First, Middle Initial)

Ms. Debbie K. Paul, CLU, ChFC

Mailing Address 4001 MacArthur Blvd Suite 300

City

Newport Beach

State

CA

Zip Code

92660

FEC ID number of contributing
federal political committee.

C

Name of Employer
Securian Financial Network

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868550

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional)

126.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Ronald F. Kramer, LUTCF

Mailing Address P. O. Box 26

City

Pierce

State

NE

Zip Code

68767

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ron Kramer Insurance

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868552

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Gary T. Wolff, CLU, ChFC,

Mailing Address 131 Barstow Lane

City

Tolland

State

CT

Zip Code

06084

FEC ID number of contributing
federal political committee.

C

Name of Employer
Minnesota Life

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868556

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Mr. Kenneth E. Knox, CLU, ChFC

Mailing Address Unit 9, 10 East St

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing
federal political committee.

C

Name of Employer
Penn Mutual

Occupation
Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868557

Amount of Each Receipt this Period

50.40

SUBTOTAL of Receipts This Page (optional)

91.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 235
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Joel K. Williamson, CLU, CSA,L

Mailing Address 1750 Cord 16

City

Tulsa

State

TX

Zip Code

79088

FEC ID number of contributing
federal political committee.

C

Name of Employer
Financial Solutions

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868570

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Wilcox, LUTCF,CLTC

Mailing Address 117 Great Brook Rd.

City

New Milford

State

CT

Zip Code

06776

FEC ID number of contributing
federal political committee.

C

Name of Employer
MetLife Financial Services

Occupation

Special Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868593

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Byron Hyatt Erstad, Jr.

Mailing Address 2510 S Nantucket Way

City

Boise

State

ID

Zip Code

83706

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erstad & Company

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868610

Amount of Each Receipt this Period

50.40

SUBTOTAL of Receipts This Page (optional)

105.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas R. Clark, CLU, ChFC

Mailing Address 1603 22nd St Ste 202

City

West Des Moines

State

IA

Zip Code

50266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Compensation Designs

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868614

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

Mr. Charles W. Potts, CLU, RHU,

Mailing Address 12725 St. Andrews Ter

City

Oklahoma City

State

OK

Zip Code

73120

FEC ID number of contributing
federal political committee.

C

Name of Employer
MassMutual Financial Group

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868618

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Mr. Dale F. Mamele, CLU

Mailing Address 111 Old Home Pl.

City

Columbia

State

SC

Zip Code

29212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Summer Insurance Agency,
LLC

Occupation

PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868628

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 235
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Bradley, CLU

Mailing Address 148 Grove Street

City

Westwood

State

MA

Zip Code

02090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bradley Insurance Agency,
Inc

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.92

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868642

Amount of Each Receipt this Period

41.66

B.

Full Name (Last, First, Middle Initial)

Mr. Lawrence Edward Sneed, CLU

Mailing Address 5005 Woodminster

City

Oakland

State

CA

Zip Code

94601

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868652

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Wayne Miles Eckman, LUTCF

Mailing Address 701 W 2350 N

City

Woods Cross

State

UT

Zip Code

84087

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868656

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

83.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Daniel L. Rust, LUTCF

Mailing Address 114 W. Arnold

City

Bozeman

State

MT

Zip Code

59715

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868657

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

Mr. H. Dan Smith, CLU, LUTCF

Mailing Address 1616 Rio Vista

City

Dallas

State

TX

Zip Code

75208

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3195.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868662

Amount of Each Receipt this Period

215.00

C.

Full Name (Last, First, Middle Initial)

Mr. Ronald W. Erickson, CLU, AEP,

Mailing Address 3002 St. Regis Rd

City

Greensboro

State

NC

Zip Code

27408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erickson Financial Compan-
ies

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868672

Amount of Each Receipt this Period

46.75

SUBTOTAL of Receipts This Page (optional)

321.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. George B. Bryce, CLU, ChFC

Mailing Address 2730 Ardon Ln

City

Casper

State

WY

Zip Code

82609

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Insurance Agency

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868674

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. R. Art Lubomski, CLU

Mailing Address 4137 Beech Ave

City

Erie

State

PA

Zip Code

16508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lincoln Financial Advisors

Occupation

Registered Rep.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868677

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Martin Montefel, CLU

Mailing Address 16932 SW 5th Way

City

Weston

State

FL

Zip Code

33326

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montefel Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868679

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

113.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Duane W. Biede, LUTCF

Mailing Address 1705 Highland Dr.

City

Hasting

State

NE

Zip Code

68901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868682

Amount of Each Receipt this Period

22.50

B.

Full Name (Last, First, Middle Initial)

Mr. Lance B. Kolbet, RHU, LUTCF

Mailing Address 4632 Mountain Park Rd.

City

Pocatello

State

ID

Zip Code

83202

FEC ID number of contributing
federal political committee.

C

Name of Employer
University Financial Group

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1842.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868684

Amount of Each Receipt this Period

126.00

C.

Full Name (Last, First, Middle Initial)

Mr. Daryl W. Broberg, MDRT

Mailing Address 1531 3rd St.

City

Sutherland

State

NE

Zip Code

69165

FEC ID number of contributing
federal political committee.

C

Name of Employer
Life Investor Ins. G. of
America

Occupation

Areas Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868688

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

173.50

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 235

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Howard Raymond Utz, LUTCF

Mailing Address PO Box 480

City

Mars

State

PA

Zip Code

16046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kansas City Life Insurance
Company

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	0	7

Transaction ID: 5868700

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Mr. Marcus T. Henderson, Sr., LUTCF

Mailing Address 109 Barrington Court East

City

Franklin

State

TN

Zip Code

37067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Henderson Financial Group,
Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	0	7

Transaction ID: 5868703

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Gary A. Bramon, CLU, ChFC

Mailing Address 269 San Felipe Way

City

Novato

State

CA

Zip Code

94945

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alders Financial Solutions

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	0	7

Transaction ID: 5868705

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

97.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Barton C. Pasco, CLU, ChFC,

Mailing Address 309 Running Cedar Lane

City

Richmond

State

VA

Zip Code

23229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pasco Financial Group, LLC

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868709

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Charles M. Weinstein

Mailing Address 32 E 22ND ST.

City

HUNTINGTON STATION

State

NY

Zip Code

11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
MetLife Financial Services

Occupation
Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868710

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Richard Lee Harlow, CLU, CSA, CB

Mailing Address 12250 Angel Wing Ct

City

Reston

State

VA

Zip Code

20191

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Harlow Group, LLC

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868713

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

113.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. William V. Irons, CLU, LUTCf

Mailing Address 150 Prospect Rd

City

Wakefield

State

RI

Zip Code

02879

FEC ID number of contributing
federal political committee.

C

Name of Employer
Irons & Associates

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868717

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Mr. Douglas B. Massey, CLU, ChFC,

Mailing Address 3115 Southwest Blvd.

City

San Angelo

State

TX

Zip Code

76904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Doug Massey Financial Ser-
vices

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868719

Amount of Each Receipt this Period

42.50

C.

Full Name (Last, First, Middle Initial)

Mr. Ronald G. Hester, CLU, ChFC

Mailing Address 261 New River Heights Rd.

City

Boone

State

NC

Zip Code

28607

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jefferson Pilot Financial

Occupation

Division Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868723

Amount of Each Receipt this Period

46.75

SUBTOTAL of Receipts This Page (optional)

114.45

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Norman A. Coltrane, LUTCF

Mailing Address 1607 Hatherleigh Drive

City

Fayetteville

State

NC

Zip Code

28304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Callahan & Rice

Occupation

Life Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868728

Amount of Each Receipt this Period

60.50

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen G. Summerlin, CFP

Mailing Address 4014 N. W. 15th Street

City

Gainesville

State

FL

Zip Code

32605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Summerlin Financial Advis-
ors, Inc.

Occupation

Certified Financial Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868731

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. John A. Davidson, LUTCF, FSS

Mailing Address 1497 Rancho Lane

City

Thousand Oaks

State

CA

Zip Code

91362

FEC ID number of contributing
federal political committee.

C

Name of Employer
Davidson Insurance & Fina-
ncial Service

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1310.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868736

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

207.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 235
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Lanny D. Levin, CLU, ChFC

Mailing Address 313 Laurel

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lanny D. Levin Agency, In-
c.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868742

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Mark V. Snider, ChFC

Mailing Address 44 Elmwood Place

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Snider, Fuller, Porter &
Associates

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868743

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Ms. Debra L. Franklin-Schatzki

Mailing Address 380 W 12th St

City

New York

State

NY

Zip Code

10014

FEC ID number of contributing
federal political committee.

C

Name of Employer
M & K Financial Services,
LLC

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868745

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

126.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert B. Anderson, CLU

Mailing Address 1456 Old Boones Creek Road

City State Zip Code
Jonesborough TN 37659

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tennessee Financial

Occupation
Division Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868749

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Vincent M. D'Addona, CLU, ChFC

Mailing Address 141 Greenway Road

City State Zip Code
Lido Beach NY 11561

FEC ID number of contributing
federal political committee.

C

Name of Employer
D'Addona Rosenbaum

Occupation
General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868751

Amount of Each Receipt this Period

85.00

C.

Full Name (Last, First, Middle Initial)

Ms. Carol A. Anderson, LUTCF, CFP

Mailing Address 717 N. 87th St.

City State Zip Code
Omaha NE 68114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sharp Anderson Arena Curn-
es & Assoc

Occupation
Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868755

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 235
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas M. Hawco, CLU, ChFC

Mailing Address 900 Rockhurst Drive

City

Lincoln

State

NE

Zip Code

68510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hawco, Anderson & Associa-
tes

Occupation

Agency Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868757

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey J. Taggart

Mailing Address 1107 Cedar Ln.
P.O. Box 2433

City

Cody

State

WY

Zip Code

82414

FEC ID number of contributing
federal political committee.

C

Name of Employer
Taggart Company

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868765

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Fredric Kofke, LUTCF

Mailing Address 3009 State Hill Rd

City

Wyomissing

State

PA

Zip Code

19610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kofke Associates

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868774

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

113.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. William J. Brannon, CLU, CPCU

Mailing Address 5215 Mockingbird Road

City

Greensboro

State

NC

Zip Code

27406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Group U.S., Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.20

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868778

Amount of Each Receipt this Period

23.10

B.

Full Name (Last, First, Middle Initial)

Mr. Randall C. Wimsatt, LUTCF

Mailing Address 2460 E 20th St

City

Farmington

State

NM

Zip Code

87401

FEC ID number of contributing
federal political committee.

C

Name of Employer
ING Financial Partners

Occupation
District Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868780

Amount of Each Receipt this Period

25.20

C.

Full Name (Last, First, Middle Initial)

Mr. Steven M. Daniel, CLU, ChFC,

Mailing Address 2600 Meadowbrook Dr

City

Butte

State

MT

Zip Code

59701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Daniel Financial Services,
Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868787

Amount of Each Receipt this Period

25.20

SUBTOTAL of Receipts This Page (optional)

73.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Frank E. Skaw

Mailing Address 18821 E. Crestwood Lane

City

Otis Orchards

State

WA

Zip Code

99027

FEC ID number of contributing
federal political committee.

C

Name of Employer
CPS-Reliable Financial Gr-
oup

Occupation

Agency Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868792

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. H. Keith de Noble, LUTCF, CLU

Mailing Address 13200 W Markham Street, Suite 105

City

Little Rock

State

AR

Zip Code

72211

FEC ID number of contributing
federal political committee.

C

Name of Employer
H. Keith de Noble Ins. Ag-
ency, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868797

Amount of Each Receipt this Period

36.00

C.

Full Name (Last, First, Middle Initial)

Mr. Nicholas John Stosic

Mailing Address 9820 Dixon Lane

City

Reno

State

NV

Zip Code

89511

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmers Insurance Group

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1314.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868804

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

117.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Shelly D. Pensky, LLC

Mailing Address 2855 S. 4th Avenue #118

City

Yuma

State

AZ

Zip Code

85364

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmers Insurance Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868805

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Mr. William J. Lynch, LUTCF

Mailing Address 5075 SW Griffith Dr. #200

City

Beaverton

State

OR

Zip Code

97005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmers Insurance

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868811

Amount of Each Receipt this Period

37.50

C.

Full Name (Last, First, Middle Initial)

Mr. Troy D. DeLair, LUTCF

Mailing Address 841 E 3550 N

City

North Ogden

State

UT

Zip Code

84414

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farm Bureau Financial Ser-
vices

Occupation

Career Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868817

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

92.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. David D. Cameron, LUTCF

Mailing Address 1142 FAIRVIEW AVE.

City State Zip Code
 Rupert ID 83350

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAMERON & CAMERON

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868824

Amount of Each Receipt this Period

6.00

B.

Full Name (Last, First, Middle Initial)

Mr. Ronald T. Staebell

Mailing Address 4309 Town Park Pl.

City State Zip Code
 Sioux Falls SD 57105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Howalt-McDowell INS.INC.

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868825

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Herbert F. Mischke, CLU, ChFC

Mailing Address 322 East County Road D

City State Zip Code
 Little Canada MN 55117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blaeser Mischke Financial
Group Inc.

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868826

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

48.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Eric S. Roth, LUTCF

Mailing Address 2 Mckinley Ct.

City

Monroe Twp

State

NJ

Zip Code

08831

FEC ID number of contributing
federal political committee.

C

Name of Employer
Smith Barney

Occupation

Vice President- Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868829

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Lynda D. Turner, LUTCF

Mailing Address 1070 South Bosque Loop

City

Bosque Farms

State

NM

Zip Code

87068

FEC ID number of contributing
federal political committee.

C

Name of Employer
AXA Advisors, LLC

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868830

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

Mr. Walter C. Sprye, Jr., CLU, C

Mailing Address 101 Stoney Brook Rd.

City

Rocky Mount

State

NC

Zip Code

27804

FEC ID number of contributing
federal political committee.

C

Name of Employer
AXA Advisors, LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868844

Amount of Each Receipt this Period

46.20

SUBTOTAL of Receipts This Page (optional)

112.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Frank H. Briggs, Jr., CLU, C

Mailing Address 2610 Bohler Rd NW

City

Atlanta

State

GA

Zip Code

30327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Briggs & Associates/AXA
Advisors, LLC

Occupation

Financial Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868848

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Ronald D. Brant, CLU, LUTCF

Mailing Address 10234 Hoffman

City

Maybee

State

MI

Zip Code

48159

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jefferson Pilot Financial

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2596.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868864

Amount of Each Receipt this Period

208.00

C.

Full Name (Last, First, Middle Initial)

Mr. Roy W. Kern, LUTCF, CLTC

Mailing Address 3775 West Randall Road

City

Springfield

State

MO

Zip Code

65810

FEC ID number of contributing
federal political committee.

C

Name of Employer
Roy W. Kern & Associate

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868866

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

318.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Raymond H. Moran, CLU, ChFC

Mailing Address 5463 Irvin Park Cove

City

Memphis

State

TN

Zip Code

38119

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Moran Company

Occupation

General Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868870

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. William A. Carlisle, CLU

Mailing Address 2356 Hawkhurst

City

Memphis

State

TN

Zip Code

38119

FEC ID number of contributing
federal political committee.

C

Name of Employer
UCL Financial Group

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868875

Amount of Each Receipt this Period

17.50

C.

Full Name (Last, First, Middle Initial)

Mr. Jeff L. Holland, CLU, ChFC

Mailing Address 200 Matthew Drive

City

Paducah

State

KY

Zip Code

42001

FEC ID number of contributing
federal political committee.

C

Name of Employer
HollandStivers & Assoc.,
LLC

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868876

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

89.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James W. Oglesby, LUTCF

Mailing Address P. O. Box 1555

City

ENKA

State

NC

Zip Code

28728

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.W. Oglesby & Associates

Occupation

Senior Sales Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1716.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868880

Amount of Each Receipt this Period

143.00

B.

Full Name (Last, First, Middle Initial)

Ms. Donna J. Burrill, CLU, ChFC,

Mailing Address P.O.BOX 143

City

FORT COLLINS

State

CO

Zip Code

80522

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burrill Financial Service

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868882

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Mr. Paul R. Decker, CLU, ChFC

Mailing Address Box 1832

City

Idaho Falls

State

ID

Zip Code

83403

FEC ID number of contributing
federal political committee.

C

Name of Employer
Beneficial Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868885

Amount of Each Receipt this Period

50.40

SUBTOTAL of Receipts This Page (optional)

223.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. S. Mark Weeks, LUTCF, CLU

Mailing Address 1389 South 500 East

City

Salt Lake City

State

UT

Zip Code

84105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bankers Life & Casualty
Co.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868887

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Ms. Mary C. Castiglione, RHU

Mailing Address 33 Muirfield Ct.

City

Dover

State

DE

Zip Code

19904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Health Insurance Assoc.

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868888

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mr. Barry K. Rake, LUTCF

Mailing Address 1004 Dawne Drive

City

Williamsport

State

PA

Zip Code

17701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kent A. Bennett & Associa-
tes

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868889

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

71.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Scholz, CLU, ChFC

Mailing Address 1510 So. 183 Circle

City

Omaha

State

NE

Zip Code

68130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ameritas Financial Services

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868891

Amount of Each Receipt this Period

105.00

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas C. Noll, CLU, ChFC

Mailing Address 1420 Farm House Lane

City

Middletown

State

PA

Zip Code

17057

FEC ID number of contributing
federal political committee.

C

Name of Employer
Noll Financial Services

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.25

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868900

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Mr. Edwin R. Hamilton, CLU, LUTCF

Mailing Address 4318 Council Circle

City

Jackson

State

MS

Zip Code

39206

FEC ID number of contributing
federal political committee.

C

Name of Employer
American General

Occupation
General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868919

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

131.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Claude A. Marlowe, Jr., LUTCF

Mailing Address 1101 Radcliffe Avenue

City

Kingsport

State

TN

Zip Code

37664

FEC ID number of contributing
federal political committee.

C

Name of Employer
AIG/American General

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868927

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Henry L Prien, CLU, LUTCF

Mailing Address 415 38th St S Ste E

City

Fargo

State

ND

Zip Code

58103

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Family Life Insu-
rance Co.

Occupation

District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868933

Amount of Each Receipt this Period

50.40

C.

Full Name (Last, First, Middle Initial)

Mr. Larry M. Jacobson, LUTCF

Mailing Address 2304 Tamaroc Drive

City

Sioux Falls

State

SD

Zip Code

57103

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Family Life Insu-
rance Company

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868937

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

92.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert C. Buxman, LUTCF

Mailing Address 12690 NW Lorraine Dr.

City

Portland

State

OR

Zip Code

97229

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA-Oregon

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868950

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Frank R. Nolimal, CLU, ChFC,

Mailing Address 2017 Grafton Ave

City

Henderson

State

NV

Zip Code

89014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Assurance Ltd

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868962

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Mr. Marvin R. Keys, LUTCF

Mailing Address 8785 Inverness Place

City

Tuscaloosa

State

AL

Zip Code

35405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alfa Insurance

Occupation

District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868967

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)

103.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Sally A. Bisgard, LUTCF

Mailing Address 529 N. Main

City

Waubay

State

SD

Zip Code

57273

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thrivent Financial for Lu-
therans

Occupation

District Representative

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868969

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Alex Hanson, CLU, ChFC,

Mailing Address 7888 Glen Finnan Cir

City

Ft Myers

State

FL

Zip Code

33912

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dawson Companies

Occupation

Insurance Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868978

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas R. Laster, RHU

Mailing Address 1713 Elmhurst Ave

City

Nichols Hills

State

OK

Zip Code

73120

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rogers Benefit Group

Occupation

Regional Representative

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868984

Amount of Each Receipt this Period

50.40

SUBTOTAL of Receipts This Page (optional)

113.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Hollis O. Inglett, Jr., LUTCF

Mailing Address 31 Cone Rd

City

Ormond Beach

State

FL

Zip Code

32174

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hayward Brown Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868987

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Mark R. Warren, LUTCF

Mailing Address 3603 Grandview

City

Plainview

State

TX

Zip Code

79072

FEC ID number of contributing
federal political committee.

C

Name of Employer
Warren Insurance Services

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5868998

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Johnny Jon Johnson, LUTCF

Mailing Address 3770 N Frandon Avenue

City

Meridian

State

ID

Zip Code

83646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Regence BlueShield of Ida-
ho

Occupation

Boise District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869003

Amount of Each Receipt this Period

27.00

SUBTOTAL of Receipts This Page (optional)

119.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Jack H. Curtis

Mailing Address 1508 Morning Glory Cr.

City

Tupelo

State

MS

Zip Code

38801

FEC ID number of contributing
federal political committee.

C

Name of Employer
United American Insurance
Co.

Occupation

Branch Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869005

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Karl Erik Hansen, CLU, ChFC,

Mailing Address 900 North Shoreline Boulevard

City

Mountain View

State

CA

Zip Code

94043

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Vita Companies

Occupation

Brokerage Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869013

Amount of Each Receipt this Period

42.50

C.

Full Name (Last, First, Middle Initial)

Ms. Rae Lee Olson

Mailing Address 218 N El Monte Ave

City

Los Altos

State

CA

Zip Code

94022

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Vita Companies

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869021

Amount of Each Receipt this Period

42.50

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 145 / 235
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. David V. Dellinger

Mailing Address 3052 Stanton Circle

City

Carmichael

State

CA

Zip Code

95608

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA-California

Occupation

Executive Vice President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: 5869025

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Bruce H. Kantor, CLU, LUTCF

Mailing Address 2901 Cross Country Rd

City

Charlotte

State

NC

Zip Code

28270

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kantor & Associates

Occupation

BROKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

277.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: 5869028

Amount of Each Receipt this Period

23.10

C.

Full Name (Last, First, Middle Initial)

Mr. William N. Haraway

Mailing Address 113 Fairview Ave

City

Frederick

State

MD

Zip Code

21701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Haraway Financial Services

Occupation

Financial Consultant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

533.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	0	/	2	0	0	7

Transaction ID: 5869029

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

107.10

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Kelli J. Carmichael, CLU, LUTCF

Mailing Address 2914 S Coffman

City

Casper

State

WY

Zip Code

82604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lincoln Financial Advisors

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869034

Amount of Each Receipt this Period

22.50

B.

Full Name (Last, First, Middle Initial)

Mr. Brian R. Phares, LIC, RFC

Mailing Address 1420 Hackberry Road

City

North Platte

State

NE

Zip Code

69101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phares Financial Services

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869037

Amount of Each Receipt this Period

47.50

C.

Full Name (Last, First, Middle Initial)

Mr. Richard L. Hill, CLU, ChFC,

Mailing Address 2611 Alvo Road

City

Seward

State

NE

Zip Code

68434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unico Financial Services,
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869038

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

112.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Shirley A. Nielsen, LUTCF, CLU

Mailing Address 2817 Circle Drive

City

Grand Island

State

NE

Zip Code

68801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farm Bureau Financial Ser-
vices

Occupation

District Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869040

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. David A. Middaugh, CLU, AEP

Mailing Address 3273 Evergreen Road

City

Fargo

State

ND

Zip Code

58102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Middaugh & Associates, In-
c.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1512.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869043

Amount of Each Receipt this Period

126.00

C.

Full Name (Last, First, Middle Initial)

Mr. Carl James Maus, LUTCF

Mailing Address 432 Fort Saratoga

City

Saint Charles

State

MO

Zip Code

63303

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance and Investment
Services

Occupation

Career Development Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869045

Amount of Each Receipt this Period

50.40

SUBTOTAL of Receipts This Page (optional)

226.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Donald A. Eichelberger

Mailing Address 3217 Highway D65

City

Dysart

State

IA

Zip Code

52224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eichelberger and Associat-
es

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869047

Amount of Each Receipt this Period

50.40

B.

Full Name (Last, First, Middle Initial)

Mr. Robert M. Nelson, CLU, LUTCF

Mailing Address 14712 Shirley Street

City

Omaha

State

NE

Zip Code

68144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Grace-Mayer Ins. Agency

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869048

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. John R. Dean, LUTCF, CLU,

Mailing Address 1700 S.W. 15th Ave.

City

Willmar

State

MN

Zip Code

56201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Affiliated Financial Serv-
ices Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869050

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Leslie W. Lee, CLU, ChFC

Mailing Address 7522 E Hampstead Ct.

City

Middleton

State

WI

Zip Code

53562

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmer Financial Services

Occupation
Trainer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869051

Amount of Each Receipt this Period

25.20

B.

Full Name (Last, First, Middle Initial)

Mr. T. Leslie Littleton, LUTCF, CLU

Mailing Address 1025 E. Austin

City

Nacogdoches

State

TX

Zip Code

75965

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Ins. Co

Occupation
PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869054

Amount of Each Receipt this Period

47.50

C.

Full Name (Last, First, Middle Initial)

Mr. Eugene H. Burkett, LUTCF

Mailing Address PO Box 921

City

Felton

State

CA

Zip Code

95018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Link

Occupation
Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869055

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

93.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James W. Rutledge, CLU, ChFC

Mailing Address 102 S. Plymouth Rd

City

Dallas

State

TX

Zip Code

75211-2653

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869057

Amount of Each Receipt this Period

17.00

B.

Full Name (Last, First, Middle Initial)

Mr. Guy S. Bowering

Mailing Address 129 Woodland Hills Blvd.

City

Madison

State

MS

Zip Code

39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Producers Group

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869067

Amount of Each Receipt this Period

22.50

C.

Full Name (Last, First, Middle Initial)

Mr. Lawrence E. Lounds

Mailing Address 2477 Valley Oaks Circle

City

Flint

State

MI

Zip Code

48532

FEC ID number of contributing
federal political committee.

C

Name of Employer
Security 1st Benefits Cor-
p.

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1415.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869084

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

144.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. David A. Culley, CLU, ChFC

Mailing Address 4187 Club Drive N.E.

City

Atlanta

State

GA

Zip Code

30319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nease, Lagana, Eden & Cul-
ley Inc

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869086

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Mr. Angelo T. Stath

Mailing Address 7821 Massachusetts

City

Merrville

State

IN

Zip Code

46410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Angelo T. Stath Ins. & Fi-
nc

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869090

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Mark B. Schwendeman

Mailing Address 427 4th St

City

Marietta

State

OH

Zip Code

45750

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Schwendeman Agency IN-
C.

Occupation

PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869094

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

122.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. William C. Anderson, LUTCF

Mailing Address 205 Whippoorwill Lane

City

Altamonte Spgs

State

FL

Zip Code

32701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rogers Benefit Group

Occupation

Field Sales Representative

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869096

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Glenford B. Malcolm, Sr.

Mailing Address P. O. Box 822315

City

South Florida

State

FL

Zip Code

33082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Monumental Life

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869097

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Mr. C. Phillip Smelley, CIC, LUTCF

Mailing Address 380 Broadmoor Drive

City

Fayetteville

State

GA

Zip Code

30215

FEC ID number of contributing
federal political committee.

C

Name of Employer
TheCompleteInsuranceSource

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869101

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

88.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Laurene B. Prevette, LUTCF, RHU

Mailing Address 741 Romany Road

City

Charlotte

State

NC

Zip Code

28203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Equity Brokerage, Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869105

Amount of Each Receipt this Period

27.50

B.

Full Name (Last, First, Middle Initial)

Mr. Gary M. Lane, CLU

Mailing Address 925 Highland Terrance NE

City

Atlanta

State

GA

Zip Code

30306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baird & Lane

Occupation
Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869110

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Edward A. Zabielski, Jr.

Mailing Address 104 Clay Ct.

City

Landenberg

State

PA

Zip Code

19350

FEC ID number of contributing
federal political committee.

C

Name of Employer
Edward A. Zabielski Jr &
Co.

Occupation
President/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869113

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

157.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James W. Monteverde

Mailing Address WaterWorks Road

City

Sewickley

State

PA

Zip Code

15143

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Monteverde Group, LLC

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869115

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. John C. Parker, RHU, LTCP

Mailing Address 47 Laurel Hill Drive

City

Niantic

State

CT

Zip Code

06357

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parker Agency - Health Re-
lated Insuran

Occupation

PRINCIPAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869117

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Kent A. Bennett

Mailing Address 280 Hollow Road

City

Muncy

State

PA

Zip Code

17756

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kent A. Bennett & Assoc.,
Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869119

Amount of Each Receipt this Period

87.50

SUBTOTAL of Receipts This Page (optional)

162.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Randy L. Scritchfield, CFP, LUTCF

Mailing Address 10105 Nightingale St.

City

Gaithersburg

State

MD

Zip Code

20882

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montgomery Financial Group,
Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869120

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Michael O. Brown, LUTCF

Mailing Address 6512 Nell 3

City

Edmond

State

OK

Zip Code

73013

FEC ID number of contributing
federal political committee.

C

Name of Employer
MassMutual Financial Group

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869125

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Mr. Dale J. Seymour

Mailing Address 2401 Wealdstone Rd.

City

Toledo

State

OH

Zip Code

43617

FEC ID number of contributing
federal political committee.

C

Name of Employer
MassMutual Financial Group

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869131

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

91.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Stephen D. Estler, CLU, ChFC

Mailing Address 2177 NE 63 St.

City

Fort Lauderdale

State

FL

Zip Code

33308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mass Mutual

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869134

Amount of Each Receipt this Period

42.50

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph S. Pantozzi, CLU, ChFC

Mailing Address PO Box 95063

City

Las Vegas

State

NV

Zip Code

89193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alpha & Omega Financial
Svcs.

Occupation

Brokerage Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869143

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Mr. Donald C. Jayne, CLU, ChFC

Mailing Address 20402 Tulsa Street

City

Chatsworth

State

CA

Zip Code

91311

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive Financial Systems

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869149

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

127.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Lawrence L. Kitts, CLU, ChFC, R

Mailing Address 10842 Mount Curve Rd

City

Eden Prairie

State

MN

Zip Code

55347

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horizon Agency Inc.

Occupation

Agency Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869151

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert D. Thunselle, FIC, CLU

Mailing Address 4020 Gannett #3

City

Casper

State

WY

Zip Code

82609

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thrivent Financial

Occupation

District Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869157

Amount of Each Receipt this Period

27.50

C.

Full Name (Last, First, Middle Initial)

Mr. Alan L. Fry, CLU, CFP,

Mailing Address 15112 Lima Road

City

Huntertown

State

IN

Zip Code

46748

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lincoln Financial Distributors

Occupation

Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869170

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)

69.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Kevin J. Leahy, LUTCF,CLTC

Mailing Address 2141 Llewellyn Pkwy

City

Forked River

State

NJ

Zip Code

08731

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Life Ins. Co./IL

Occupation

Financial Services Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869174

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Neil M. Cubberley, CLU,ChFC,

Mailing Address P.O.BOX 5109

City

SEVIERVILLE

State

TN

Zip Code

37864

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cubberley Agency

Occupation

OWNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869175

Amount of Each Receipt this Period

27.50

C.

Full Name (Last, First, Middle Initial)

Mr. Mark L. Yavornitzki, CAE

Mailing Address 14 Bridle Pl.

City

E. Greenbush

State

NY

Zip Code

12061

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA - New York State

Occupation

Executive Vice President and Managing

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869178

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

67.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert E. Evans, CLU, ChFC,

Mailing Address 42 Willowbrook Road

City

Holden

State

MA

Zip Code

01520

FEC ID number of contributing
federal political committee.

C

Name of Employer
FMG Financial Services,
Inc.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869186

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

Mr. Matthew S. Tassey

Mailing Address 5 Reggio Ave.

City

Old Orchard Beach

State

ME

Zip Code

04064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burwell & Burwell

Occupation
Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 5869187

Amount of Each Receipt this Period

72.00

C.

Full Name (Last, First, Middle Initial)

Mr. James Antony Clary, CLU, MSM

Mailing Address 12 Tall Tree Circle

City

Broomall

State

PA

Zip Code

19008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Independence Financial As-
sociates

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 7

Transaction ID: 6476103

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

193.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. M. Carl Heintzelman, CLU

Mailing Address 332 Sage Tr.

City

North Kingstown

State

RI

Zip Code

02852

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Brokerage Servi-
ces, Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: 6476266

Amount of Each Receipt this Period

120.00

B.

Full Name (Last, First, Middle Initial)

Mr. John Carlton Deaton, CLU, ChFC

Mailing Address 566 Browning Place

City

Winston Salem

State

NC

Zip Code

27103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Special Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 6476289

Amount of Each Receipt this Period

137.50

C.

Full Name (Last, First, Middle Initial)

Ms. Mary Nishioka

Mailing Address 1650 Borel Place #100

City

San Mateo

State

CA

Zip Code

94402

FEC ID number of contributing
federal political committee.

C

Name of Employer
MacCorkle Ins. Services

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 6476351

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

507.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Ms. Charmaine Uhrig, LUTCF

Mailing Address RR 1 Box 273A

City

Minatare

State

NE

Zip Code

69356

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Transaction ID: 6476365

Amount of Each Receipt this Period

117.50

B.

Full Name (Last, First, Middle Initial)

Mr. Alan J. Benet, CLU

Mailing Address 430 Center Ave.

City

Mamaroneck

State

NY

Zip Code

10543

FEC ID number of contributing
federal political committee.

C

Name of Employer
A. J. Benet Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 6476391

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Wayne Y. Tanaka, LUTCF

Mailing Address 565 Alihi Place

City

Kailua

State

HI

Zip Code

96734

FEC ID number of contributing
federal political committee.

C

Name of Employer
MassMutual Financial Group

Occupation

Registered Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: 6476494

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

517.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas J. Von Riesen, CLU, ChFC

Mailing Address 312 N 96th Street

City

Omaha

State

NE

Zip Code

68114

FEC ID number of contributing
federal political committee.

C

Name of Employer
SilverStone Group, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: 6476514

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas M. Rountree, CLU, ChFC,

Mailing Address 1984 S. Newark Way

City

Aurora

State

CO

Zip Code

80014

FEC ID number of contributing
federal political committee.

C

Name of Employer
AmerUs Life

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: 6476534

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Howard B. Cowan, CLU ChFC

Mailing Address 941 Park Ave 8B

City

New York

State

NY

Zip Code

10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cowan Financial Group

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: 6476560

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1025.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Kenneth H. Pendley

Mailing Address 722 Kenwood Rd

City

Fayetteville

State

GA

Zip Code

30214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Partners Insurance Agency
Inc.

Occupation

President/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 6 / 2 0 0 7

Transaction ID: 6476611

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Messina

Mailing Address 2836 Grande Valley

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing
federal political committee.

C

Name of Employer
APPS Para Medical Services

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 7

Transaction ID: 6476617

Amount of Each Receipt this Period

120.00

C.

Full Name (Last, First, Middle Initial)

Mr. Douglas K. Flink, CLU ChFC

Mailing Address 4226 Mcdonald Drive North

City

Stillwater

State

MN

Zip Code

55082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Foster, Klima & Company

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: 6476659

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

620.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Sidney Levine, CLU, AEP

Mailing Address 626 Riverside Dr

City

Ormond Beach

State

FL

Zip Code

32176

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive Compensation Gr-
oup

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: 6476665

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. James M. Fuller, LUTCF

Mailing Address 467 Richland Ave

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Snider, Fuller, Porter &
Assoc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: 6476667

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Mr. James P. Belk, CLU, ChFC

Mailing Address 211 Old Orchard Lane

City

Richmond

State

VA

Zip Code

23226

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCG Companies

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: 6476669

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Sanford A. Schmidt, CLU, ChFC,

Mailing Address 3860 Greenacre Dr.

City

Northbrook

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Schmidt Financial Group,
Inc.

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: 6476693

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Douglas R. Franklin, CLU, ChFC

Mailing Address 79 Woodfin Place, S-101

City

Asheville

State

NC

Zip Code

28801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Champagne Financial Netwo-
rk, Inc

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: 6476709

Amount of Each Receipt this Period

275.00

C.

Full Name (Last, First, Middle Initial)

Mr. Larry G. Foster, Jr., CLU, CF

Mailing Address 10 Windrock Way

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
MassMutual Financial Group

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: 6476721

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Daniel J. Wells, LUTCF

Mailing Address 18830 Los Hermanos Ranch Rd

City

Valley Center

State

CA

Zip Code

92082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmers Financial Services

Occupation

Owner/Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 7

Transaction ID: 6476729

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. John P. Mosley, CLU, ChFC,

Mailing Address 24 Pitt Street

City

Portland

State

ME

Zip Code

04103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eagle Strategies Corp.

Occupation

Financial Adviser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: 6476768

Amount of Each Receipt this Period

-23.04

C.

Full Name (Last, First, Middle Initial)

Jeri L. Turley

Mailing Address P. O. Box 1520

City

Richmond

State

VA

Zip Code

23218

FEC ID number of contributing
federal political committee.

C

Name of Employer
BCG Companies

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: 6476875

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

526.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Van E. Mueller, LUTCF

Mailing Address 929 N. Astor St. #2008

City

Milwaukee

State

WI

Zip Code

53202

FEC ID number of contributing
federal political committee.

C

Name of Employer
New England Financial

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Transaction ID: 6476947

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Ms. Cindy G. Moyers, CIC,CISR,L

Mailing Address 1029 East Brentwood Dr

City

Morristown

State

TN

Zip Code

37814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Strate Insurance Group Inc

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 7

Transaction ID: 6476949

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. C. Duncan Beard, CLU

Mailing Address 478 Westover Dr

City

Atlanta

State

GA

Zip Code

30305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Beard-Shuford Financial
Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: 6476980

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 / 235

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Eric John Hieber

Mailing Address PO Box 1520

City

Richmond

State

VA

Zip Code

23218

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	0	7

Transaction ID: 6477016

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Adi Ringer, LUTCF, CFP

Mailing Address 888 Vista Brisa

City

San Luis Obispo

State

CA

Zip Code

93405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burrola Ringer

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: 6477028

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. James C. Clabuesch

Mailing Address 11375 Fairway Dr

City

Roscommon

State

MI

Zip Code

48653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Clabuesch Financial Servi-
ces

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	7

Transaction ID: 6477036

Amount of Each Receipt this Period

-50.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Gerald G. Hartman, CLU,RHU

Mailing Address 3822 Gemini Circles

City

Boise

State

ID

Zip Code

83709

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Network America

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 6477048

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Teitelbaum

Mailing Address One Cityplace
CP 17

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Travelers Life & Annuity

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 3 / 2 0 0 7

Transaction ID: 6477072

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mr. Albert J. Schiff, CLU, AEP

Mailing Address 11 Mohawk Ln.

City

Greenwich

State

CT

Zip Code

06831

FEC ID number of contributing
federal political committee.

C

Name of Employer
NYLEX Benefits

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 6477074

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. V. Stanley Benfell, CLU, ChFC

Mailing Address 77 E Street

City

Salt Lake City

State

UT

Zip Code

84103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Beacon Financial

Occupation
M.G.A.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 6477110

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Edward F. Glennon

Mailing Address 7343 Cascade Drive

City

Boise

State

ID

Zip Code

83704

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Heritage Life Ins
Co

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 6477130

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Mr. Marte A. Formico, LUTC

Mailing Address 14456 Sobey Road

City

Saratoga

State

CA

Zip Code

95070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farmers Insurance Group

Occupation
District Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 6477137

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph R. Nienhaus, FLMI

Mailing Address 1600 Cedar Bend

City

Hartland

State

WI

Zip Code

53029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Woodbury Financial

Occupation

Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 6477145

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Mr. Douglas F. Bennetti, LUTCF

Mailing Address 806 Quail Run

City

Wyoming

State

DE

Zip Code

19934

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nationwide Insurance

Occupation

Sales Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: 6477171

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Mr. Kurt D. Reber

Mailing Address 1430 East 8020 South

City

Sandy

State

UT

Zip Code

84093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horizon Financial

Occupation

Financial Professional

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 6477177

Amount of Each Receipt this Period

-250.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Krupin, CLU

Mailing Address 4803 Lockgreen Circle

City

Richmond

State

VA

Zip Code

23226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Micheal J. Krupin CLU, LTD

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: 6477183

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert P. Ferrone

Mailing Address 4545 NW 5th

City

Ocala

State

FL

Zip Code

34475

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Reginal Sales Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 7

Transaction ID: 6477187

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jason E. Brooks, CLU, ChFC

Mailing Address 4680 Woodbine Circle

City

West Bloomfield

State

MI

Zip Code

48323

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brooks Financial

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 7

Transaction ID: 6477193

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Tom B. Brown, CLU,ChFC,M

Mailing Address 5084 W. Whiteland Rd

City

Greenwood

State

IN

Zip Code

46143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 7

Transaction ID: 6477237

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Mark L. Yavornitzki, CAE

Mailing Address 14 Bridle Pl.

City

E. Greenbush

State

NY

Zip Code

12061

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA - New York State

Occupation

Executive Vice President and Managing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477275

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. James R. Worrell, Sr.

Mailing Address 6235 Morrison Boulevard

City

Charlotte

State

NC

Zip Code

28211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477281

Amount of Each Receipt this Period

412.50

SUBTOTAL of Receipts This Page (optional)

937.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Barry N. Link, CLU, ChFC

Mailing Address 1200 Midwest Lane

City

Wheaton

State

IL

Zip Code

60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Link Diversified Svcs Inc

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477299

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Vincent M. D'Addona, CLU, ChFC

Mailing Address 141 Greenway Road

City

Lido Beach

State

NY

Zip Code

11561

FEC ID number of contributing
federal political committee.

C

Name of Employer
D'Addona Rosenbaum

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477305

Amount of Each Receipt this Period

-85.00

C.

Full Name (Last, First, Middle Initial)

Mr. Kevin J. Leahy, LUTCF, CLTC

Mailing Address 2141 Llewellyn Pkwy

City

Forked River

State

NJ

Zip Code

08731

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Life Ins. Co./IL

Occupation

Financial Services Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477335

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 175 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Tom Carlson, CLU, ChFC

Mailing Address 1203 Tilden

City

State

Zip Code

Holdrege

NE

68949

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Principal Financial
Group

Occupation

Senior Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477347

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert E. Mathis, CLU

Mailing Address 5040 Roswell Rd Ne Ste 320

City

State

Zip Code

Atlanta

GA

30342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Peachtree Planning Corp./-
Mathis-Hill-R

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477373

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mr. Donald C. Jayne, CLU, ChFC

Mailing Address 20402 Tulsa Street

City

State

Zip Code

Chatsworth

CA

91311

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive Financial Systems

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477377

Amount of Each Receipt this Period

-25.00

SUBTOTAL of Receipts This Page (optional)

975.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas E. Cooper, LUTCF, RHU

Mailing Address 2341 McVay Cove

City

Germantown

State

TN

Zip Code

38138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kansas City Life Insurance
Company

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477481

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Harold A. Gillet, LUTCF

Mailing Address 8711 Mashie Lane

City

Missoula

State

MT

Zip Code

59808

FEC ID number of contributing
federal political committee.

C

Name of Employer
Security Life of Denver

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477510

Amount of Each Receipt this Period

61.80

C.

Full Name (Last, First, Middle Initial)

Mr. Timothy D. Foster

Mailing Address 6370 Pleasant View Cove

City

Chanhassen

State

MN

Zip Code

55317

FEC ID number of contributing
federal political committee.

C

Name of Employer
Foster, Klima & Company,
LLC

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477526

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

811.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Charles I. Daniels, III

Mailing Address 2424 Merlot Drive

City

Napa

State

CA

Zip Code

94558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harvest Financial, LLC

Occupation

Family Financial Coach

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477554

Amount of Each Receipt this Period

-25.00

B.

Full Name (Last, First, Middle Initial)

Mr. J. Gregory Norton, LUTCF

Mailing Address 251 Milthorn Court

City

Riva

State

MD

Zip Code

21140

FEC ID number of contributing
federal political committee.

C

Name of Employer
CBIZ/Benico

Occupation

Senior Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477604

Amount of Each Receipt this Period

120.00

C.

Full Name (Last, First, Middle Initial)

Mr. James Richard Worrell, Jr.

Mailing Address 2033 Beverly Dr

City

Charlotte

State

NC

Zip Code

28207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual Finan-
cial Network

Occupation

Managing Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477647

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Russell F. Bent

Mailing Address 94 Hastings Lane

City

Hainesport

State

NJ

Zip Code

08036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pathways

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: 6477717

Amount of Each Receipt this Period

180.00

B.

Full Name (Last, First, Middle Initial)

Mr. Timothy C. Flanagan, Jr.

Mailing Address 2007 Maynard Rd

City

Charlotte

State

NC

Zip Code

28270

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hinrichs Flanagan Financi-
al

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477737

Amount of Each Receipt this Period

192.50

C.

Full Name (Last, First, Middle Initial)

Mr. John A. Sayour, CLU,ChFC,L

Mailing Address 285 Riverside Ave, Suite 200

City

Westport

State

CT

Zip Code

06880

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Financial Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: 6477806

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

622.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Rick G. Walters, LUTCF

Mailing Address P. O. Box 477

City

Beverly

State

OH

Zip Code

45715

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dietz, Futrell & Walters
Insurance, Inc

Occupation

Agency Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 7

Transaction ID: 6477852

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. John W. Geer, CLU

Mailing Address 8204 Holly Ridge Road

City

Jacksonville

State

FL

Zip Code

32256

FEC ID number of contributing
federal political committee.

C

Name of Employer
Northwestern Mutual

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 0 7

Transaction ID: 6477918

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael L. Kerley, JD

Mailing Address 2901 Telestar Court

City

Falls Church

State

VA

Zip Code

22042

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1149.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478005

Amount of Each Receipt this Period

52.25

SUBTOTAL of Receipts This Page (optional)

802.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 180 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Michael L. Kerley, JD

Mailing Address 2901 Telestar Court

City

Falls Church

State

VA

Zip Code

22042

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Senior Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1201.75

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478007

Amount of Each Receipt this Period

52.25

B.

Full Name (Last, First, Middle Initial)

Mr. Dennis D. Hruby, LUTCF

Mailing Address 3530 Hillside Cir

City

Lincoln

State

NE

Zip Code

68506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dennis Hruby Insurance

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: 6478043

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Krisann K. Miehe, CSA

Mailing Address 625 N Segoe Rd #807

City

Madison

State

WI

Zip Code

53705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blackhawk Wealth Management

Occupation

Investment Advisor Representative

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 4 / 2 0 0 7

Transaction ID: 6478053

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

362.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478067

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478069

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478071

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

180.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478073

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478075

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478077

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478079

Amount of Each Receipt this Period

27.50

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478081

Amount of Each Receipt this Period

247.50

C.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478083

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478085

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478087

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478089

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478091

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478093

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478095

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 / 235

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	7

Transaction ID: 6478097

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	7

Transaction ID: 6478099

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	7

Transaction ID: 6478140

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1675.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478142

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1725.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478144

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1775.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478146

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478148

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1975.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478150

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2025.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478152

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2075.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478154

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2125.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478156

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478158

Amount of Each Receipt this Period

112.50

SUBTOTAL of Receipts This Page (optional)

212.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 190 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478160

Amount of Each Receipt this Period

37.50

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478162

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2425.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478164

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

187.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2525.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478166

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Healy, CAE

Mailing Address 2931 Ordway St., NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2575.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478168

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Sr VP Law & Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.60

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478172

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)

170.83

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Sr VP Law & Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.43

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478174

Amount of Each Receipt this Period

20.83

B.

Full Name (Last, First, Middle Initial)

Sharon G. Heierman, CAE

Mailing Address 2990 Kemp Rd

City

Havana

State

FL

Zip Code

32333

FEC ID number of contributing
federal political committee.

C

Name of Employer
Florida Association of In-
surance & Fin

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

754.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478200

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Patricia M. Matthew, CMFC

Mailing Address 536 Lincoln Ave P O Box 1225

City

Havre

State

MT

Zip Code

59501

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waddell & Reed

Occupation

Senior Financial Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478258

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

330.83

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. W. Harold Petersen, RHU

Mailing Address 24823 Los Altos Drive

City

Valencia

State

CA

Zip Code

91355

FEC ID number of contributing
federal political committee.

C

Name of Employer
Petersen International Un-
derwriters

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 6478312

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. David L. Halvorson

Mailing Address P O Box 181

City

Fargo

State

ND

Zip Code

58107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Halvorson Company, Inc.

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 6478348

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Mr. John P. Steele, LUTCF

Mailing Address 122 West Main

City

Manhattan

State

MT

Zip Code

59741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montana Employee Benefit
Co.

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 7

Transaction ID: 6478372

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

920.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Mendenhall, CLU, ChFC

Mailing Address 1121 Custer Court

City

North Platte

State

NE

Zip Code

69101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Farm Bureau Financial Ser-
vices

Occupation

Agency Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 6478420

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Cornel J. Arceneaux, CLU, ChFC

Mailing Address 6950 S. Fieldgate Ct

City

Baton Rouge

State

LA

Zip Code

70808

FEC ID number of contributing
federal political committee.

C

Name of Employer
Insurance Designers

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 6478457

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert B. Anderson, CLU

Mailing Address 1456 Old Boones Creek Road

City

Jonesborough

State

TN

Zip Code

37659

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tennessee Financial

Occupation

Division Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 6478481

Amount of Each Receipt this Period

650.00

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. William T. Whitmore, Jr., LUTCF

Mailing Address P. O. Box 4748

City

Virginia Beach

State

VA

Zip Code

23454

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nationwide Provident

Occupation

Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 6478489

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Peter D. Holler

Mailing Address 112 Evergreen Pl

City

Bristol

State

TN

Zip Code

37620

FEC ID number of contributing
federal political committee.

C

Name of Employer
SBS Services

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 6478495

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

Mr. Ralph Antolino, Sr.

Mailing Address 3240 W. Henderson Rd #A

City

Columbus

State

OH

Zip Code

43220-2300

FEC ID number of contributing
federal political committee.

C

Name of Employer
Antolino & Associates

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 6478515

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. James L. Penn, LUTCF

Mailing Address P.O. Box 361

City

Dania

State

FL

Zip Code

33004

FEC ID number of contributing
federal political committee.

C

Name of Employer
AIG American General

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 6478529

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Bernard M. Baudin, CLU

Mailing Address 632 Hesper Ave.

City

Metairie

State

LA

Zip Code

70005

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life

Occupation

Assistant Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 7 / 2 0 0 7

Transaction ID: 6478595

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Alan R. Finkelstein, CLU

Mailing Address 215 Melbourne Road

City

Great Neck

State

NY

Zip Code

11021

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFCO Industries Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6478859

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 235
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas W. Burke, CLU, ChFC

Mailing Address 6935 Hillwood Circle

City

Dallas

State

TX

Zip Code

75248

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hefner & Associates Inc

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6478861

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Mr. Roger S. McCullough, CLU

Mailing Address 2759 19th Ave N

City

Fort Dodge

State

IA

Zip Code

50501

FEC ID number of contributing
federal political committee.

C

Name of Employer
AXA Equitable

Occupation
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6478863

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Wolfe, CLU, ChFC, M

Mailing Address 555 Saddle Mountain Road

City

Colorado Springs

State

CO

Zip Code

80919

FEC ID number of contributing
federal political committee.

C

Name of Employer
AXA Advisors

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6478865

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Jonas L. Borntrager, LUTCF

Mailing Address 205 A S Liberty St

City

Harrisonburg

State

VA

Zip Code

22801

FEC ID number of contributing
federal political committee.

C

Name of Employer
LD&B Insurance Agency Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6478929

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. James R. Christensen, Jr.

Mailing Address 440 Regency Pkwy Dr #139

City

Omaha

State

NE

Zip Code

68114

FEC ID number of contributing
federal political committee.

C

Name of Employer
INSOURCE, Inc.

Occupation

General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6478931

Amount of Each Receipt this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Mr. Joseph L. Kizer, RIC

Mailing Address 513 South 88th St

City

Omaha

State

NE

Zip Code

68114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Resource Insurance Consul-
tants

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6478933

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Richard A. Strevey, CFP, RFC

Mailing Address 15311 Bemis Street

City

Omaha

State

NE

Zip Code

68154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Strevey Financial Services

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6478965

Amount of Each Receipt this Period

187.50

B.

Full Name (Last, First, Middle Initial)

Mr. Jon R. Weber, LUTCF, FIC

Mailing Address 57371 310th Ave.

City

Palmer

State

IA

Zip Code

50571

FEC ID number of contributing
federal political committee.

C

Name of Employer
Trinstead

Occupation
District Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6479019

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Mr. H. Thomas Hollinger, CLU, ChFC

Mailing Address 17 Quail Crossing Road

City

Wilmington

State

DE

Zip Code

19807

FEC ID number of contributing
federal political committee.

C

Name of Employer
NewtonOne

Occupation
Agent/President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6479081

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

467.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Mark D. Johnson, CLU, ChFC,

Mailing Address 199 Billings Dr

City

Superior

State

WI

Zip Code

54880

FEC ID number of contributing
federal political committee.

C

Name of Employer
Johnson Insurance Consul-
tants

Occupation

Agent/Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 6479223

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Gaylord W. Mussman, LUTCF, CLU

Mailing Address 634 E Military Ave

City

Fremont

State

NE

Zip Code

68025

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Ins.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6479250

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Mr. Stephen L. Kagawa, LUTCF

Mailing Address 825 S Primrose Ave Suite C

City

Monrovia

State

CA

Zip Code

91016

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Pacific Bridge Compan-
ies

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: 6479264

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)

1650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Steven C. Price

Mailing Address 2819 Ridge Road

City

Allison Park

State

PA

Zip Code

15101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Solenture, Inc.

Occupation

CHAIRMAN & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479286

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. James D. Schulz, CLU, ChFC

Mailing Address 6601 South 66th. St.

City

Lincoln

State

NE

Zip Code

68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Midlands

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: 6479353

Amount of Each Receipt this Period

1250.00

C.

Full Name (Last, First, Middle Initial)

Mr. John D'Arcy Becker, CLU, AEP

Mailing Address 200 Fountain St

City

Mandeville

State

LA

Zip Code

70448

FEC ID number of contributing
federal political committee.

C

Name of Employer
John D. Becker & Assoc.,
Inc.

Occupation

Chairman & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479361

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1062.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479416

Amount of Each Receipt this Period

62.50

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479418

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1162.50

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479420

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

162.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1212.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479422

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1262.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479424

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1437.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479426

Amount of Each Receipt this Period

175.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1462.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479428

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1587.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479430

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1712.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479432

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1737.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479434

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1962.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479436

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2062.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479438

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479440

Amount of Each Receipt this Period

137.50

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479442

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479444

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

237.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479446

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479448

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2475.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479450

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479452

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479454

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2625.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479456

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2675.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479458

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479460

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479462

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479464

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3075.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479466

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3125.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479468

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 211 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479470

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479472

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479474

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 212 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479496

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479498

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479500

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Miller, M.S., M.A.

Mailing Address 727 Smithridge Rd.

City

New Canaan

State

CT

Zip Code

06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
Miller-Pomerantz

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479502

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Donald Allan Brown

Mailing Address 6675 S.W. 90 Court

City

Miami

State

FL

Zip Code

33173

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brown & Associates

Occupation

AGENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479522

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Marwan Jabbour

Mailing Address 7601 Lewinsville Road, Suite 420

City

Mc Lean

State

VA

Zip Code

22102

FEC ID number of contributing
federal political committee.

C

Name of Employer
USA Financial Planning Pa-
rtners

Occupation

President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: 6479572

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Cale Paul Smith

Mailing Address 376 Riverlon Ave

City

Baton Rouge

State

LA

Zip Code

70806

FEC ID number of contributing
federal political committee.

C

Name of Employer
Smith Financial Group

Occupation

Financial Representative

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 7

Transaction ID: 6479574

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Matthew J. McAnaney

Mailing Address 4592 Bloomsbury Dr

City

Syracuse

State

NY

Zip Code

13215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Syracuse Group
Sales

Occupation

DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479611

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Ms. Carolyn Lloyd-Cohen, CLU, ChFC

Mailing Address 72B Dwright Place

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Preferred Pensions LLC

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: 6479661

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John A. Mangin, Jr., CLU, C

Mailing Address 7009 Pelican Island Dr

City

Tampa

State

FL

Zip Code

33634

FEC ID number of contributing
federal political committee.

C

Name of Employer
One America Financial Par-
tners

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: 6479718

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Timothy J. O'Connor, CLU, ChFC

Mailing Address 2112 West John St.

City

Grand Island

State

NE

Zip Code

68803

FEC ID number of contributing
federal political committee.

C

Name of Employer
O'Connor & Associates Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: 6479804

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. David L. Belk, CLTC

Mailing Address 2 Bay Tree Court

City

Greensboro

State

NC

Zip Code

27455

FEC ID number of contributing
federal political committee.

C

Name of Employer
Belk Financial Group

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479828

Amount of Each Receipt this Period

550.00

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. John Bryan Setzler

Mailing Address 1996 6th St. NW

City

Hickory

State

NC

Zip Code

28601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capital Concepts Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: 6479850

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

Mr. John Clifton Still, III, RHU

Mailing Address P. O. Box 311

City

Dover

State

DE

Zip Code

19903

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dover Financial Group, Inc.

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: 6479854

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. James C. Clabuesch

Mailing Address 11375 Fairway Dr

City

Roscommon

State

MI

Zip Code

48653

FEC ID number of contributing
federal political committee.

C

Name of Employer
Clabuesch Financial Services

Occupation

Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.50

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 7

Transaction ID: 6479875

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

575.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Timothy H. Holladay

Mailing Address 8926 Ross Ln.

City

New Port Richey

State

FL

Zip Code

34654

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm Insurance Comp-
anies

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: 6479901

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)

Mr. Jimmy S. Holland, Jr.

Mailing Address 107 Brooke Dr

City

Muscle Shoals

State

AL

Zip Code

35661

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tom Jones Financial

Occupation
Branch Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: 6480029

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas F. Lowry, CSA, CAA

Mailing Address 3811 Glen Arbor Ct

City

atlanta

State

GA

Zip Code

30319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Georgia Financial Group,
LLC

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 7

Transaction ID: 6480096

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 218 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Michael L. Kerley, JD

Mailing Address 2901 Telestar Court

City

Falls Church

State

VA

Zip Code

22042

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1097.25

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: 6480140

Amount of Each Receipt this Period

52.25

B.

Full Name (Last, First, Middle Initial)

Mr. Roger J. Lowery, CLU, ChFC

Mailing Address 216 Country Club Ln

City

Belleville

State

IL

Zip Code

62223

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Lowery Group

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: 6480174

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey M. Shkolnick, CFP

Mailing Address 6363 Woodway Drive
Suite 710

City

Houston

State

TX

Zip Code

77057

FEC ID number of contributing
federal political committee.

C

Name of Employer
Houston Advantage Ins. Br-
rokerage

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: 6480239

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

702.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 219 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey Leonard Allison, ChFC, CLU

Mailing Address 401 Wampanoag Trail, #100

City

Riverside

State

RI

Zip Code

02915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Oceanstate Financial

Occupation

Registered Representative-Financial Ad

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: 6480269

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAIFA

Occupation

Sr VP Law & Govt Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.77

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 7

Transaction ID: 6480287

Amount of Each Receipt this Period

20.83

C.

Full Name (Last, First, Middle Initial)

Mr. Arnold M. Katz, CLU

Mailing Address 1270 Round Hill Road

City

Bryn Mawr

State

PA

Zip Code

19010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brokerage Concepts, Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: 6480305

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2670.83

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Charles M. Olson, CFP, CLU, Ch

Mailing Address 15836 Howard St.

City

Omaha

State

NE

Zip Code

68118

FEC ID number of contributing
federal political committee.

C

Name of Employer
OCI Insurance & Financial
Services

Occupation
AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: 6480309

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen D. Andersen, RHU

Mailing Address 1621 Dixie Trail

City

Lincoln

State

NE

Zip Code

68527

FEC ID number of contributing
federal political committee.

C

Name of Employer
Midlands

Occupation
Chairman - CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: 6480333

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Rosenzweig, CLU, ChFC,

Mailing Address 13 Augusta Lane

City

Manhasset

State

NY

Zip Code

11030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rosenzweig Financial Serv-
ices

Occupation
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 7

Transaction ID: 6480493

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 / 235

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Mr. Marc A. Silverman, CLU, ChFC,

Mailing Address 5770 S.W. 128th Street

City

Miami

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Silverman Financial

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 7

Transaction ID: 6480561

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)

Mr. Alec P. Berkman, CLU

Mailing Address 1056 S Easthills Drive

City

West Covina

State

CA

Zip Code

91791

FEC ID number of contributing
federal political committee.

C

Name of Employer
Financial Kinetics Corp.

Occupation

Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: 6480579

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Cohn

Mailing Address

City

State

MD

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: 6480650

Amount of Each Receipt this Period

450.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

57579.49

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 222 / 235

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Wachovia

Mailing Address

City

State

Zip Code

Purpose of Disbursement

bank Chrges

Candidate Name

001
Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: 6475868

Date of Disbursement

12 / 27 / 2007

Amount of Each Disbursement this Period

1458.82

bank Chrges

SUBTOTAL of Disbursements This Page (optional)

1458.82

TOTAL This Period (last page this line number only)

1458.82

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 223 / 235

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Stivers for Congress

Mailing Address 81 S Fifth Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Contribution: State Senator Steve Stivers (OH-15-R-US House)

Candidate Name
Mr. Steve Stivers

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: 6449724

Date of Disbursement

12 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

Contribution: State Senat-
or Steve Stivers (OH-15-R-
US House)

B.

Full Name (Last, First, Middle Initial)

Nebraska Leadership PAC (NELPAC)

Mailing Address 420 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution: Nebraska Leadership PAC (PAC to PAC)

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 6433405

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

5000.00

Contribution: Nebraska Le-
adership PAC (PAC to PAC)

C.

Full Name (Last, First, Middle Initial)

Norm Coleman for US Senate

Mailing Address 1410 Energy Park Drive #11

City Saint Paul State MN Zip Code 55108

Purpose of Disbursement
Contribution: Norm Coleman (MN-R-US Senate)

Candidate Name
Norm Coleman

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District:

Transaction ID: 6449726

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

2500.00

Contribution: Norm Coleman
(MN-R-US Senate)

SUBTOTAL of Disbursements This Page (optional) ►

12500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 224 / 235

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) Woolsey for Congress	Transaction ID: 6449730 Date of Disbursement																				
Mailing Address P.O. Box 750176	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	7												
City Petaluma State CA Zip Code 94975	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution: Lynn C. Woolsey (CA-6-D-US House)	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Lynn Woolsey	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 06	Contribution: Lynn C. Woolsey (CA-6-D-US House)																				
B. Full Name (Last, First, Middle Initial) Ellen Tauscher for Congress	Transaction ID: 6449729 Date of Disbursement																				
Mailing Address 20 Park Road, Suite E	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	7												
City Burlingame State CA Zip Code 94010	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution: Ellen O. Tauscher (CA-10-D-US House)	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name Ellen Tauscher	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 10	Contribution: Ellen O. Tauscher (CA-10-D-US House)																				
C. Full Name (Last, First, Middle Initial) Putnam for Congress Committee	Transaction ID: 6449728 Date of Disbursement																				
Mailing Address PO Box 2426	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	7												
City Bartow State FL Zip Code 33831	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution: Adam H. Putnam (FL-12-R-US House)	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Adam Putnam	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 12	Contribution: Adam H. Putnam (FL-12-R-US House)																				

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 225 / 235

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) Synergy PAC	Transaction ID: 6433412 Date of Disbursement
Mailing Address 6849 Old Dominion Drive, Suite 222	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 4 / 2 0 0 7</div> </div>
City McLean State VA Zip Code 22101	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: Synergy PAC (PAC to PAC)	<div>5000.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution: Synergy PAC (PAC to PAC)
B. Full Name (Last, First, Middle Initial) The Madison PAC	Transaction ID: 6433413 Date of Disbursement
Mailing Address 235 State Street, Suite 206	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 4 / 2 0 0 7</div> </div>
City Springfield State MA Zip Code 01103	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: The Madison PAC (PAC to PAC)	<div>5000.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution: The Madison PAC (PAC to PAC)
C. Full Name (Last, First, Middle Initial) Kuhl for Congress	Transaction ID: 6449725 Date of Disbursement
Mailing Address 10 Ganesvoort Street	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 4 / 2 0 0 7</div> </div>
City Bath State NY Zip Code 14810	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: John Randall Kuhl (NY-29-R-US House)	<div>1500.00</div>
Candidate Name John Kuhl	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution: John Randall Kuhl (NY-29-R-US House)

SUBTOTAL of Disbursements This Page (optional)

11500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 226 / 235

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) Clarke for Congress	Transaction ID: 6449727 Date of Disbursement																				
Mailing Address 111-36 200th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	4		2	0	0	7												
City Hollis State NY Zip Code 11412	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution: Yvette D. Clarke (NY-11-D-US House)	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name Clarke	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 11	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Contribution: Yvette D. Clarke (NY-11-D-US House)																					
B. Full Name (Last, First, Middle Initial) Searchlight Leadership Fund	Transaction ID: 6433418 Date of Disbursement																				
Mailing Address 422 C Street, NE/Lower Level	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	5		2	0	0	7												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution: Searchlight Leadership Fund (PAC to PAC)	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Contribution: Searchlight Leadership Fund (PAC to PAC)																					
C. Full Name (Last, First, Middle Initial) Team Emerson for Jo Ann Emerson	Transaction ID: 6449734 Date of Disbursement																				
Mailing Address P.O. Box 822	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	5		2	0	0	7												
City Cape Girardeau State MO Zip Code 63702	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution: Jo Ann Emerson (MO-8-R-US House)	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Jo Ann Emerson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Contribution: Jo Ann Emerson (MO-8-R-US House)																					

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 227 / 235

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) Jobs Opportunity & Education PAC (JOE PAC)	Transaction ID: 6433416 Date of Disbursement
Mailing Address P. O. Box 75214	<div> <div>12</div> <div>05</div> <div>2007</div> </div>
City Washington State DC Zip Code 20013	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: JOE PAC (PAC to PAC)	<div>5000.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution: JOE PAC (PAC to PAC)
B. Full Name (Last, First, Middle Initial) Louie Gohmert for Congress Committee	Transaction ID: 6449736 Date of Disbursement
Mailing Address P.O. Box 8060	<div> <div>12</div> <div>05</div> <div>2007</div> </div>
City Tyler State TX Zip Code 75711	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: Louie Gohmert (TX-1-R-US House)	<div>1000.00</div>
Candidate Name Gohmert	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution: Louie Gohmert (TX-1-R-US House)
C. Full Name (Last, First, Middle Initial) Tiberi for Congress	Transaction ID: 6449731 Date of Disbursement
Mailing Address 2021 E. Dublin Granville Rd # 2000	<div> <div>12</div> <div>05</div> <div>2007</div> </div>
City Columbus State OH Zip Code 43229	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: Patrick J. Tiberi (OH-12-R-US House)	<div>5000.00</div>
Candidate Name Patrick Tiberi	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution: Patrick J. Tiberi (OH-12-R-US House)

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 228 / 235

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Latta for Congress Committee

Mailing Address 300 North Main Street

City State Zip Code
Bowling Green OH 43402

Purpose of Disbursement
Contribution: Robert E. Latta (OH-5-R-special general-US House)

Candidate Name
Latta

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2007 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: OH District: 05 2007 US General

Transaction ID: 6449738

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

2500.00

Contribution: Robert E. Latta (OH-5-R-special general-US House)

B.

Full Name (Last, First, Middle Initial)

Richardson for Congress

Mailing Address 1212 S Victory Blvd

City State Zip Code
Burbank CA 91502

Purpose of Disbursement
Contribution: Laura Richardson (CA-37-D-debt retirement-special general)

Candidate Name
Richardson

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2007 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: CA District: 37

Transaction ID: 6449733

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

2000.00

Contribution: Laura Richardson (CA-37-D-debt retirement-special general)

C.

Full Name (Last, First, Middle Initial)

Committee for the Preservation of Capitalism

Mailing Address PO Box 65314

City State Zip Code
Washington DC 20036

Purpose of Disbursement
Contribution: Committee Capitalism (PAC to PAC)

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
 State: District:

Transaction ID: 6433414

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

5000.00

Contribution: Committee Capitalism (PAC to PAC)

SUBTOTAL of Disbursements This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 229 / 235

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Harry Mitchell for Congress

Mailing Address PO Box 23748

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Contribution: Harry Mitchell (AZ-5-D-US House)

Candidate Name
Mitchell

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 17

Transaction ID: 6449732

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution: Harry Mitchell (AZ-5-D-US House)

B.

Full Name (Last, First, Middle Initial)

Boren For Congress

Mailing Address PO Box 149

City
Okemah

State
OK

Zip Code
74859

Purpose of Disbursement
Contribution: Daniel Boren (OK-2-D-US House)

Candidate Name
Daniel Boren

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OK District: 02

Transaction ID: 6449735

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

2500.00

Contribution: Daniel Boren (OK-2-D-US House)

C.

Full Name (Last, First, Middle Initial)

ERIC PAC

Mailing Address 209 Pennsylvania Avenue, SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Contribution: ERIC PAC (PAC to PAC)

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 6433415

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

5000.00

Contribution: ERIC PAC (PAC to PAC)

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 230 / 235

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) John Stephen for Congress Mailing Address PO Box 57	Transaction ID: 6449739 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 7</div> </div>
City State Zip Code Manchester NH 03105 Purpose of Disbursement Contribution: John Stephen (NH-1-R-US House) Candidate Name John Stephen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NH District: 01	Amount of Each Disbursement this Period <div>1000.00</div> Contribution: John Stephen (NH-1-R-US House)
B. Full Name (Last, First, Middle Initial) Charlie Ross for Congress Mailing Address PO Box 5993 City State Zip Code Brandon MS 39047 Purpose of Disbursement Contribution: Charlie Ross (MS-3-R-US House) Candidate Name Ross Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MS District: 03	Transaction ID: 6449737 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 5 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>5000.00</div> Contribution: Charlie Ross (MS-3-R-US House)
C. Full Name (Last, First, Middle Initial) Tim Mahoney for Florida Mailing Address 1128-408 Royal Palm Beach Blvd. City State Zip Code Royal Palm Beach FL 33411 Purpose of Disbursement Contribution: Timothy Mahoney (FL-16-D-US House) Candidate Name Mahoney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 16	Transaction ID: 6449741 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 1 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> Contribution: Timothy Mahoney (FL-16-D-US House)

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 231 / 235

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

AMERIPAC

Mailing Address 499 South Capitol St, SW #414

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement

Contribution: AMERIPAC (PAC to PAC)

Candidate Name

011

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 6433427

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

Contribution: AMERIPAC (P-
AC to PAC)

B.

Full Name (Last, First, Middle Initial)

Lauzen for Congress

Mailing Address PO Box 5445

City
Aurora

State
IL

Zip Code
60507

Purpose of Disbursement

Contribution: Chris Lauzen (IL-14-R-US House)

Candidate Name

Lauzen

011

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 14

Transaction ID: 6449742

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Contribution: Chris Lauzen
(IL-14-R-US House)

C.

Full Name (Last, First, Middle Initial)

Friends of Jeb Hensarling

Mailing Address PO Box 820504

City
Dallas

State
TX

Zip Code
75382

Purpose of Disbursement

Contribution: Jeb Hensarling (TX-5-R-US House)

Candidate Name

Jeb Hensarling

011

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 05

Transaction ID: 6449740

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Contribution: Jeb Hensarl-
ing (TX-5-R-US House)

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 232 / 235

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) Putnam for Congress Committee	Transaction ID: 6449744 Date of Disbursement																				
Mailing Address PO Box 2426	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	2		2	0	0	7												
City Bartow State FL Zip Code 33831	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution: Adam H. Putnam (FL-12-R-US House)	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Adam Putnam	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 12	Contribution: Adam H. Putnam (FL-12-R-US House)																				
B. Full Name (Last, First, Middle Initial) Mike Rogers for Congress	Transaction ID: 6449743 Date of Disbursement																				
Mailing Address PO Box 581	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	2		2	0	0	7												
City Brighton State MI Zip Code 48116	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution: Michael J. Rogers (MI-8-R-US House)	<table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name Michael Rogers	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 08	Contribution: Michael J. Rogers (MI-8-R-US House)																				
C. Full Name (Last, First, Middle Initial) Citizens for Hope Responsibility Independence	Transaction ID: 6433438 Date of Disbursement																				
Mailing Address and Service PAC 607 14th Street, NW/Suite 800	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	0	7												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution: CHRIS PAC (PAC to PAC)	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Contribution: CHRIS PAC (PAC to PAC)																				

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 233 / 235

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) Citizens for Hope Responsibility Independence	Transaction ID: 6475803 Date of Disbursement
Mailing Address and Service PAC 607 14th Street, NW/Suite 800	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
Purpose of Disbursement Void - Citizens for Hope Responsibility Independence Candidate Name	<input type="text" value="-5000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Void - Citizens for Hope Responsibility Independence	
B. Full Name (Last, First, Middle Initial) Great Plains Leadership Fund	Transaction ID: 6433434 Date of Disbursement
Mailing Address 122 Maryland Avenue, NE, Suite 3A	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: Great Plains Leadership Fund (PAC to PAC) Candidate Name	<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Contribution: Great Plains Leadership Fund (PAC to PAC)	
C. Full Name (Last, First, Middle Initial) TOMPAC	Transaction ID: 6433436 Date of Disbursement
Mailing Address P. O. Box 16488	<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City Arlington State VA Zip Code 22215	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution: TOMPAC (PAC to PAC) Candidate Name	<input type="text" value="5000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Contribution: TOMPAC (PAC to PAC)	

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 234 / 235

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Narragansett Bay PAC

Mailing Address PO Box 8628

City

Cranston

State

RI

Zip Code

02920

Purpose of Disbursement

Contribution: Narragansett Bay PAC (PAC to PAC)

Candidate Name

011

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: 6433435

Date of Disbursement

12 / 14 / 2007

Amount of Each Disbursement this Period

5000.00

Contribution: Narragansett Bay PAC (PAC to PAC)

B.

Full Name (Last, First, Middle Initial)

Future Leaders PAC

Mailing Address 1155 21st Street, NW, Suite 300

City

Washington

State

DC

Zip Code

20036

Purpose of Disbursement

Contribution: Future Leaders PAC (PAC to PAC)

Candidate Name

011

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: 6433437

Date of Disbursement

12 / 14 / 2007

Amount of Each Disbursement this Period

5000.00

Contribution: Future Leaders PAC (PAC to PAC)

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

107500.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 235 / 235

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) of Debtor or CreditorNational Association of Insurance and Financial Advisors
Political Action Comm

Nature of Debt (Purpose):

Payroll, Benefits, Suppli-
es, Copies, etc

Mailing Address 2901 Telestar Court

City

State

ZIP Code

Falls Church

VA

22042

Outstanding Balance Beginning This Period

31478.66

Transaction ID: 6480670

Amount Incurred This Period

72659.61

Payment This Period

0.00

Outstanding Balance at Close of This Period

104138.27

1) **SUBTOTALS** This Period This Page (optional)..... ▶

104138.27

2) **TOTALS** This Period (last page this line number only)..... ▶

104138.27

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

104138.27